

THE ALKALOIDAL CLINIC

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CARDIAC THERAPY.

Hare read a short paper before the last meeting of the A. M. A., in which he discussed the treatment of cardiac affections. He says: "Many physicians who have carefully studied diseased organs become so saturated, so to speak, with the seriousness of the lesions which they find that they scoff at the thought that drugs can be of service, forgetting that the vital factors are eliminated at the autopsy and that the conditions present represent a state so grave that death has taken place; that is, the worst possible state of affairs is seen."

He goes on to call attention to the necessity of diagnosing the condition of the valves, the heart muscle, the state of the blood-vessels, and of the kidneys, liver, and even the dose of the drug. Careful study should be given to the condition of the heart, arterial tension, pulse force, and the possible presence of arteriocardillary fibrosis. The search for albuminuria is insufficient unless estimations of urea, and records of the output of urine and its specific gravity, are also

made. The renal elimination of toxins and of drugs must be taken into account. The proper administration of the various cardiac stimulants and their dose requires attention. Digitalis is so useful that it is apt to be given in too large doses, m. x—xx three or four times a day, in marked rupture of compensation. At first such doses may be right, but they should soon be rapidly diminished. "I have been surprised to find what excellent results I could produce from the use of such small amounts as one or two minims of an active physiologically tested tincture of digitalis given three or four times a day, the patient being, of course, required to rest, and to give his heart that most needed therapeutic aid when its compensation is ruptured."

"Digitalis, which improves the nutrition of the heart, largely by improving the circulation through the coronary arteries, can manifestly do more harm than good if these nutritive vessels are so nearly closed that it is impossible for the heart to pump blood through them

in increased quantity; and, again, if the myocardium has undergone such advanced degeneration that it is impossible for the digitalis to improve the nutrition of the heart, although at the same time it may be driving the remaining healthy fibers to an endeavor far in excess of their ability."

"Some valvular cases do not require digitalis or any heart stimulant, but in addition to rest, will often be greatly benefited by the administration of aconite, which has a steadying effect on the heart through its influence on the vagi, as has digitalis." "By sedating the heart muscle in hypertrophy, and by relaxing the blood-vessels, it produces good results." "Not infrequently I have seen cases in which the use of well balanced doses of aconite and digitalis have produced the results which neither drug could produce by itself, although at first glance they are physiological antagonists."

In the discussion following Dr. Favill accepted the combination of aconite and digitalis as paralleling that of digitalis and glonoin.

Dr. Jones corroborated the caution as to large doses of digitalis, relating a case where this resulted in collapse from which the patient was saved by glonoin and strychnine.

Dr. Anders spoke of glonoin as guarding against the effect of digitalis in hardening the vessels, and when the myocardium was the seat of fatty or fibroid change, the vessels sclerotic. It also widened the blood paths.

Readers will find the whole of this interesting study in the *Journal of the American Medical Association* for Sept. 27, 1902.

As usual, no speaker referred even re-

motely to the necessity of relieving the heart of unnecessary work, by lessening the bulk of the blood it must move. Nor do we find stated in plain terms the true measure of the desirable effect of a heart tensor. If the blood vessels have lost their tension and become flabby, the work of the heart is increased. If just sufficient of the arterial tensor is administered to restore the normal vascular tension, the heart's work is facilitated; and here, rather than in its direct cardiac stimulus, lies the true value of digitalis. But if the dose be larger, so as to contract the vessels abnormally, an obstacle is thereby placed in the route of the circulation, and this more than neutralizes the cardio-tonic effect of digitalis.

It will be noted that Dr. Hare bases his views upon the action of a physiologically tested tincture; and that is surely better than the old "hit or miss" style. But the use of these tested tinctures is to be deplored, because they postpone the resort to the only accurate and uniform therapeutic agents, the alkaloids and other active principles. And until clinical observations are based on these, nothing but more or less accurate approximations to the truth can be expected.

But no one can read such discussions without feeling that somehow the work of the alkaloidists, and the results of their observations, are filtering through into the corporate consciousness of the medical profession.

Not one of the speakers even distantly alluded to the all-important fact, that whereas the effect of digitalis endures for about twelve hours, that of glonoin is over in a very few minutes; hence the latter is of little effect in counteracting



Try calcium iodized in the first case of acute coryza that comes along, but don't give away the snap to the patient.

If you are taking any sort of a fresh cold, take calcium iodized instead. It's much pleasanter and leaves you wiser.

the vascular tension produced by the former. It is better to definitely proportion the dose, as we have indicated, with the nicety only possible when the doctor has formed the habit of accurate observation of drug-action. Or, if a vasodilation be desired concomitant with that of digitalis, the remedy indicated is atropine.

The great need of the world is the *living* philosopher. Cloisters are out of date.—(Hermetic Philosophy.)

A TYPHOID SEASON.

Chicago is not exceptional among large cities in its typhoid visitation.

The dimensions of the visitation could have been materially reduced had the city government kept the streets and alleys cleaner; for foul rags, tainted paper and excremental filth in the streets and alleys disseminate fever germs. Pools of stagnant water are also nests of febrile germs. Street dust is among the most vigorous agents in protracting epidemics and promoting other forms of deadly maladies.

Typhoid fever used to be known as autumnal fever. Its name was derived from the season which brings in the greatest profusion of fruits and vegetables. Lavish in her bounty, nature remorselessly punishes humanity for its abuse. No food is more wholesome than fruit and vegetables when ripe, sound and scientifically prepared for consumption. No edible is more deadly than an unripe or unsound fruit or vegetable.

Nature never intended that the outer sheath or rind of any fruit or vegetable should be eaten, at least uncooked. No skin of fruit or vegetable contains nu-

trition. On the contrary, the outer coat of every fruit and vegetable reeks with microscopic germs, or larger ones, which are noxious in the human mouth and stomach. These outer coats are meant to protect the inner substances from injury, while ripening for human benefit or delectation.

During growth they become infested with malignant creatures, which have vainly sought to reach the luscious or nutritious pulp. Nature guards that for humanity, and too often her sagacity and benevolence are misunderstood or despised.

Autumn is the typhoid season all over the world. There is no reason why people who observe due precaution should be apprehensive of it; except when government, which ought to preserve the health of the community, is derelict; and when ignorance and cupidity combine to spread a danger which can easily be controlled by simple methods.

While it is perfectly obvious that the discharge of sewage into the lake is a menace to the public health, it is equally clear that the present epidemic of typhoid in Chicago cannot properly be attributed to the water alone. For the disease is alarmingly prevalent in many other cities, some of which are widely separated from one another, and it has attacked households which have made it a practice for years to boil and filter the hydrant water if they use it at all.

It is an opinion which is expressed by physicians outside the health department that much of the trouble is due to the condition of vegetables this year, and the health department is treating the obviously unfit vegetables in the carts of cheap peddlers to doses of kerosene.

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A forming bronchitis taken in time evaporates under the kindly influence of calcium iodized, small doses very often.

A beautiful object lesson is had when calcium iodized is administered in capillary bronchitis and the symptoms subside.

Naturally the peddlers will object, but the work of the department is most decidedly in the line of good public policy. It is to be hoped that the vigilant inspection which is being made now will be a permanent feature of the department work, so that the attractions of decayed and filthy fruits and vegetables as an investment may disappear with the diminished profits.

Many people are under the impression that to place fruit and vegetables in an ice-box is to render them harmless, whether raw or cooked, but heat alone destroys noxious germs. Refrigeration prolongs their power for evil. Frozen edibles of every description are now carried all over the world. So long as their refrigeration continues they are deemed marketable. Those that are pure remain so. Those that have become noxious before refrigeration remain noxious.

The banana is a prolific breeder of microbes. The fruit is picked before it ripens, and in this country is generally ripened by subjection to heat, often of doubtful origin. In its native climate the banana is not eaten raw. It is baked by the cleanly and intelligent, and its sheath is always carefully removed before it is put in the oven.

Next to the danger from decaying and unripe vegetables is the menace to health found in impure milk. Medical science is positive and specific in its proof that disease-germs find in milk a fruitful field of propagation. This applies especially to all germs of a typhoid character, and direct and active connection have been discovered between the germs of typhoid fever and the impurities that lodge so readily in the milk procured through ordinary dairy channels and used so commonly for domestic purposes. Such im-

purities often go undetected, and only a rigid system of inspection, by officers qualified to perform their duties, will serve to counteract the danger. The words of caution already uttered should not go unheeded until it is determined that this source of disease contamination is closed entirely, or at least reduced to a minimum of influence.

There is something truly pathetic in the lives of those who revel in the generalities of philosophy as a sort of intellectual tonic, and are at the same time too lazy to try the formulas and hold fast to that which is good.

TAKE A REST.

We may be—fatigued—and anyone who tries to wake up the medical profession has a clear title to that tired feeling—but one thing we never weary of is urging the doctor to take a vacation. He always needs it; he rarely knows it, and generally is deeply rooted in the belief that if he lays off a week all his patients will get well, go to the other fellow, or in some manner get away from him. He is nothing but the old horse who would fall down if the shafts were removed.

So we say, go fishing—go shooting—go anywhere—do anything your soul loveth, so you go!

We want you to experience the joyous renewal of life that comes from a season away from the treadmill. We want your patients to realize by the way you take hold and make things fly when you get back how well it is for them that the doctor takes a vacation sometimes.

Editor Kraft of the *American Physician*, Cleveland, is collecting a party for



Don't give too large doses of calcium iodized, but let the doses be so close as to be almost continuous—every five minutes.

Gold is not picked up without stooping, nor the fountain head discovered without searching. Selected by Dr. Epstein.

his next European tour, to sail the first week in July. The itinerary comprises Italy, Switzerland, Germany, Belgium, Holland, France, England and Ireland. The time will be about two months, and the cost \$510, including everything. Take along at least \$200 for purchases. It is none too soon to begin planning for the trip.

Can't afford it? Oh, yes, you can. Where is the money to come from? Borrow it; the lender will have to employ you to get even; and thus, like the Syrian prince in D'Israeli's novel, you make your debts the means of furthering your plans. You recollect that he said he owed money to every man in his neighborhood, and they really could not afford to have him fail! Take the hint.

If you hide a diamond in a box, it loses all its power to be saucy and throw back the sun's rays to the sun.

IMITATION BY THE CHILD.

The tendency to mimicry that is so remarkable in the ape and the monkey, is also notably a characteristic of the young child; and it is not at all difficult for us to understand and appreciate the acts of children that are based upon conscious or semi-conscious imitation of the acts of others. But unless our attention is attracted to it, we are very apt to lose sight of the fact that there exists also a tendency in mankind toward unconscious imitation, not only of the grosser acts and thoughts of others, but also of their unconscious acts and ideas.

It is a well known fact that people who are for a long period of time associated together come to look alike; the wife will grow to imitate and look like

her husband, or *vice versa*. And as it is with the older in their companionships, so it is with the younger.

The influence that one child may have over another lies by no means in the largest degree in the effects of his conscious acts. Much more is it the case that the unrecognized peculiarities and the unconscious attributes of the child of the stronger and more original nature may, and frequently do, through the processes of unconscious imitation of other children, affect and modify not only the manner but the personal appearance of the whole school. It is always dangerous to bring into a group of children a child suffering from that not uncommon complaint, St. Vitus' dance, or a child with a pernicious habit of drawing up one side of the face or of twitching the eyelids, for it is certain that there will soon be found other members of his class and schoolmates who will acquire similar habits through unconscious imitation.

Not the least of the problems presented to school teachers, or individuals having charge of large numbers of persons in the earlier and more moldable years of life, is that of classifying and arranging the children under their charge, so as to remove the weaker natures from direct contact with the coarser and stronger, and prevent by careful selection and arrangement of scholars in schools, if possible, the adoption by one individual of the habits and traits of another, through the process of unconscious imitation.

One of the greatest dangers of the organization of our public schools and their effect upon the development of our children lies in this massing of large numbers of children indiscriminately togeth-

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Calomel is insoluble in body secretions. What chemical change must be effected to render it active?—E. P. Whitford.

Quinine needs no cholagog as antiperiodic, if body is free from irritation and dose fits autotoxemia.—E. P. Whitford.

er. It is far from my idea that there should be any classification of children upon a basis which in any wise could be avoided, that of the aristocracy against the democracy, the *hoi aristoi* against the *hoi polloi*. Rather it is my meaning that children should be classified in an effort to modify the effect of their contact with each other upon the basis of their personal characteristics, so that the greatest good could be derived by the greatest number and the least amount of harm should be produced through these two unconscious faculties of self-delusion from subjective impressions and unconscious imitation.

The position occupied by a schoolteacher is one of the most responsible that can be occupied by man or woman. For the schoolteacher stands before his classes as a person whose physical characteristics and personal character are either to be examples to be followed by the pupils, consciously or unconsciously, or are to be abhorred or avoided by them.

The teacher who possesses the faculty of interesting and holding the affections of his pupils is in a most dangerous position, for just in proportion as he possesses this faculty, just in the same proportion is he an object for conscious or unconscious imitation by his pupils, and dependent upon his character and personal appearance they will consciously through this tendency of their natures to imitation derive good or evil, as the case may be, from the teacher, as his personal characteristics are good or bad.

It is because of these faculties of unconscious imitation that we recognize it to be desirable that the schoolroom should be pleasant, cheerful and artistically decorated, so that the child may be surrounded during the years of its men-

tal plasticity with objects recognized as being truly artistic and possessing true beauty. The schoolroom, in so far as possible, should be provided with casts that are beautiful in themselves, and that possess the elements of true artistic taste; with pictures that possess as nearly as possible the perfection of color, harmonious and correctness of design; and according to my own belief, the child should be early taught to understand and recognize that nothing is so beautiful in the world as the perfect and perfecting human form.

The child should be led away from that form of silly prudery that during past generations and our present period teaches them to be ashamed to look upon the nude form in plastic and color art, as though it was something immoral. They should find in pure nature as it exists nothing shameful and nothing degrading.

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Having a theory and getting *no* fact out of it, is like having a friend who will never embrace you. (—Herm.)

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#### A WOMAN'S STRONGHOLD.

To a young wife her own home means at once her greatest safeguard, her surest development; and insures for her the respect and love of her husband in a measure which nothing else can secure for her. A young wife may hold her husband's attention and love for a while because she is pretty or well-dressed. But the prettiest girl, the best-dressed woman, soon palls upon a man when he finds out that there is nothing behind her looks or her dresses.

Much nonsense is said and written on the question of how a woman can best

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I am of the opinion that Lloyd's Echafolta will give good results in the treatment of hay fever.—J. A. Burnett.

I tried Lloyd's Echafolta for nausea and it gave instant relief. It may relieve vomiting of pregnancy.—J. A. Burnett.

hold a husband's love. The only true solution of the question lies in the home itself. Let a young wife keep within her husband's means, give him a comfortable, attractive home to come to from his work, and let her fill that home with her womanly charm, and development, and love for her husband, and she need never trouble herself as to the best method to pursue to endear herself to her husband.

A woman is lovely in a man's eyes in proportion as she is womanly in her tastes and careful of his earnings. If more wives would strive to be a rest and comfort to their husbands, by the legitimate means which God has given them to win and hold a man's love, there would be no occasion to fear as to whether they were losing their complexion, or ceasing to be their husband's ideals. If a wife chooses to remain her husband's toy, his plaything, his dear pet, she should look well to outward charms. But if she wants to be a comfort, a help, a partner to her husband, then it must be through her wise direction of her home; good order in her government and sympathy to his—and her—interests; that she can endear herself to him. Such a wife means something to a man; she means an element in his life without which he would cease to be either successful or content.

All this—this true way of living—is possible only in a home ruled over by such a wife. In a boarding-house or hotel it is impossible. Home life cements the love of husband and wife; other modes of living often loosen the tie. Nor does the question of expense excuse the not having a home. A home is not of necessity a palace. The humblest cottage is a million times better

than the most luxuriant hotel ever planned by the hand of man. In the one happiness is probable. In the other it is almost impossible.

We can talk all we choose about married happiness; that it after all rests solely between two people, that it makes no difference where they live. That is very good as a theory. But thousands of instances prove the contrary; that the theory will not work out in practice. Happiness depends upon the growth of the people who are parts of it. People who stop and stagnate are never happy. True happiness thrives on what it feeds upon. Let stagnation enter into two lives and happiness becomes stagnant and unhealthy. But let our lives be filled with contentment, with domestic pleasure, with that germ of evolution which springs from the hearthstone, and the happiness which springs from those elements is purer, sweeter and more satisfying to our natures, our minds and our souls.

A man and wife were made to abide together in inseparable lives, and as new elements come into that union to sweeten and hallow it, the abiding place should be some little corner in this big world which they can call their own, their very own, where everything around them speaks of the husband's energy and the wife's achievement. That is *home*.

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Some memories are bores like some people.—  
(Herm.)

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#### DISCONTENT.

Emerson says: "Discontent is the want of self-reliance, it is infirmity of will." Another individual, at least as solemn if not as wise as Emerson, says:

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A thorough knowledge of a few remedies in practice is of more value than a little knowledge of a vast number.—J. A. Burnett.

Milk contains no sugar—so-called sugar of milk is from fermented milk. As well say corn contains alcohol.—E. P. Whitford.

"Discontent is the foundation of all human effort." Both are right, for there are two kinds of discontent.

There is in truth a "discontent" that is the reflection of a feeble soul, a weak will. One possessing such a spirit views the world from his pigmy height and decries the ill-luck which is of his own making. He, like a rudderless, compassless craft, drifts about with the changing currents, the shifting winds and the flowing tides, with no ambition, purpose or aim. His is the discontent that leads to excesses, to foolish conduct, to neglect of duty. His is the discontent that incites to recklessness and crime. Success is not for such as he. The breadth of his vision reaches no farther than the narrow horizon of his own small, selfish soul. He strives but only to gratify the petty desires born of a feeble intellect. There can be but one word to sum up the life of one possessing such "discontent"—failure.

Again, there is another kind of "discontent." It is not the "discontent" of a weak will, but the discontent impelling to effort and achievement. One possessed of this spirit says: "Things are not as I wish they were. I will make them better." He buckles on the armor of his "discontent" and goes out to do battle. Difficulties are but the trifles to be overcome. Other men have become great, so will he. Step by step he fights his way to recognition and position. Alexander was possessed of such a discontent, and soon the whole world lay at his feet as its conqueror. All the great names of history have been among the "discontented ones." They have seen the goal afar off, it may be, but their eyes have never ceased gazing upon it, and at length it has been won.

Is there not a thought here for the doctor who has been long possessed of the spirit of "discontent"? Are there no new worlds for him to conquer? Must he tread the same old paths his father trod? Should he allow his ambition to be stifled by narrow prejudice? How about the new world of Alkalometry? Is it not well worth conquering? Why not try it?

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Your final object is to find *yourself*, but you never can do it by self-admiration.

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#### ONLY THE ACTORS CHANGE.

It is as true as trite that life is a stage; the actors change, but the play goes on. Generations pass, but the procession of lovers is unbroken. In the pastoral days Rebekah left her father's house that Isaac might bring her into his mother's (Sarah) tent. The twentieth century maid is as willing to leave her parents for the sake of the love she bears the man who has promised to cherish her with unfailing affection. Centuries have rolled on and men and women change. But in this they remain the same. To the young couple, stepping out from under the parental roof which has so long sheltered them, such action seems natural. If the son is at all doubtful he calls to his aid the Biblical injunction that: "For this cause shall a man leave father and mother and shall cleave to his wife." The girls employ the same help. Full of expectancy, radiant with hope, they go out into the great world together.

But what of the parents left behind? Do they view it as lightly? "Aye, there's the rub." It is when children reach maturity that the supreme test of parental love comes. All through infancy and

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Rhus poison: Use locally campho-menthol 3 parts, phenol 1 part; mix, and apply lightly. —E. P. Whitford, M. D., Mo.

If limited to seven remedies they would be lobelia, capsicum, bayberry, American century, wahoo, ladies' slipper and myrrh.

early years the children are more or less care. And then, just as the parents feel relieved from cares and anxieties, and are beginning to enjoy the companionship of their children in the serene and complacent way which "grown-ups" have, there comes a fluttering of the wings, a remote suggestion of flight. The son is no less his father's boy than he has been and ever will be. But he is—and who realizes it so quickly as a mother?—in a new and very natural sense, another woman's hero, and that woman a girl. With her he discerns, away out on the horizon line, the shadowy lines of a house that is to become a home, their very own. The girl, too, whose going in and out of the house has been a daily joy to the parents, she, too, has become a heroine to some one other than her father or mother. It is hard for the parents to realize that this mate of her flight can care for her as they have; that in her young eyes, in her young heart, it is possible that he can be altogether noble and capable.

And after the young birds have taken flight the parents wonder if sometimes they do not grieve in their new life. But some fine morning a clearer vision is given them, and they realize that after all their children are only playing the same role which they played a few years before. It is the old, old play; only the players have changed.

It is a magnificent quality in parents when they so prepare themselves that they can meet this inevitable time with the proper spirit—when, in other words, parental love can get the better of selfishness. It is true that it is easier to preach than to practice this experience, and yet it is something more than a theory.

A son's or a daughter's presence is unquestionably missed from a home. Nor is the other realization less keen that the parents' place in the affections of their child is no longer the first place. But what is true parental love if it does not desire the largest joy for children? Marriage, if it means anything, means new and ever increasing joys. It means, too, that in a larger and more significant sense children are brought into a closer companionship with their parents, the larger companionship of equals. This does not bespeak less of tender affection on the part of children, nor does it mean less solicitude and love on the part of the parents.

It means that the children have become the comrades of the parents, journeying along the same highway of life, with a better and clearer understanding of each other's course than ever before. It is the development of the son into a man; the blossoming out of the daughter into a woman. Our sons and daughters should not be reared for our selfish gratification, but for the largest usefulness and the greatest happiness possible to our temperaments. Then every change which comes into their lives which means new experiences, and their richer and fuller development, will be welcomed and not regretted.

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Imagination is man's greatest friend and his greatest enemy.

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#### THE POINT OF VIEW.

Few of us ever learn the secret of true judgment. We look at everything from our own individual point of view. If a book fails to please us we say that it is stupid or uninteresting. This does not

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Anti-nausea granules, working through the nervous system, are a specific for *mal de mer*.—C. A. Shepard, M. D.

Eczema: Alnuin, arsenic sulphide and copper arsenite internally, using Unguentine locally.—C. A. Shepard M. D.

necessarily make the book stupid, but we think it does, and we say so. It is not to our taste, and therefore we have no tolerance for it. Someone else reads the book and finds it the best he has ever read. Then we wonder at the taste which could relish a book which we found so dull. The idea, however, that a true judgment is always twofold rarely occurs to us.

Occasionally we meet someone who looks at everything in two ways. Not long ago one of a party making the assertion that "corn isn't fit for human beings to eat," turned to another for corroboration of the statement. "Well," the woman appealed to answered, "I should hardly say that. Corn may be good, but I do not relish it." There was the broad twofold judgment. It conceded to corn its usefulness, and at the same time presented the personal modification.

"How any one with any sense or brains can play tennis I cannot see," said a man not given to athletics. He didn't care for tennis himself, so in an extravagant manner he denounced the whole game, not conceding anything good to the pastime in the eyes of others, simply because he either did not know the game or did not enjoy it. It's a pity that more of us cannot cultivate the twofold way of looking at things. There would be less friction in life if we did, and sweeter sympathy, kinder understanding, and broader and fuller living.

The fact is that we never reach the dignity of true living, unless we do learn this all-important lesson, and that it may be cultivated admits of no doubt. It is simply a question of schooling ourselves not to condemn generally what individually does not happen to be to our taste. If, for example, we are fond of seeing

tragedy enacted on the stage, we should not therefore condemn comedy. If our taste leans towards Wagner in music, our opinions should not, for that reason, be condemnatory of comic opera. If we find rest and recreation in realistic fiction, let us not condemn works of ideal romance as useless.

If we prefer brown as a color, there is no reason on earth why we should condemn the taste of one who prefers to wear green. Let us rather be liberal in our ideas and admit that green has its uses, only that it happens not to appeal to our taste.

What the vast majority of us need is to be a little more self-poised, more judicious, more willing to see good in the tastes of other, although they do not please our own particular fancies. If we all thought alike, read the same books, saw the same plays, wore the same colors, this would be an exceedingly uninteresting world.

We cannot see all things in the same way, but we can come near to justice and true respect by taking a twofold view of things, while still retaining our strong individual views.

Seeing a possible good or use for everything does not necessarily mean a weak individuality. To recognize good, it is not necessary that we should consider it as good for ourselves, but it may be good for some one else. The most uncomfortable people in the world are those who assert their judgments in a hard, decisive and final manner, as if they were courts of last resort. On the other hand, the brightest and best minds are those that have the most respect for the opinions of others. They possess the judgment of fact, together with the individual modification. This is true judg-



Leg Ulcers: Soften by pure glycerin, curette, wash with Hydrozone, and apply Bovinine on iodoform gauze.—C. A. Shepard.

Toothache: Acetanilid rubbed up with carbolic acid and applied to cavity on a pledget of cotton.—C. A. Shepard.



ment, that shows the broad mind, the judicial character, the safe counselor. Extravagance with money, and extravagance of denunciation, are exactly alike in their results: both rob us of respect and confidence of friends.

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Truth does not arrange herself to suit us, but forces us to conform to her.

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### THE NIGHTMARE.

In attacks termed nightmare the patient has no consciousness of his exact condition. On the contrary, he dreams and has a consciousness totally different from the actual state of things; only the dream is always of some dreadful experience, and so far on the line of that is felt when the consciousness is all but properly correct. We can only reach a proper explanation of this trouble by referring to the organic nerves by which both the motor and sensory nerves are constantly supplied with their vitality. If you think, for instance, of those nerves by means of which you raise your arm, these are supplied with life itself from those ganglions of the sympathetic system, whose one office is to supply other nerves with this life. If the influence of the sympathetic nerves is in any way suspended, it becomes impossible for the motor nerves to affect the muscular system.

The central part of the sympathetic system lies just behind the stomach, and so between that organ and the back. The person who is exposed to nightmare in the ordinary way may be nearly sure of an attack if he does two things. The first of these is taking a heavy supper, and the second is falling asleep lying on his back with his head rather low.

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Tympanites cured by quassin before meals, W-A Intestinal Antiseptic after meals. Saline Laxative mornings.—C. A. Shepard.

In that position, inside and out, his stomach presses upon the solar plexus and partially at least suspends the action. As soon as this suspension of the free action of the solar plexus takes place, the spinal cord itself begins to lose its vital activity. It is the same thing as when a fighter in the ring strikes his blow which lands on this plexus of organic nerves. If sufficiently strong, the man upon whom it is landed falls as a helpless, inert mass at the feet of his foe—knocked out.

Nightmare in most cases is the result of a stomach too heavily loaded, pressing its weight upon this important nervous center.

To prevent this trouble, the absence of food before retiring is indicated. If a cup of hot water is made to stand in stead of a heavy dinner it will be an extraordinary case where the nightmare appears.

In the case of a student or young people when overdriven at school, nightmare indicates that the mind needs rest. Fasting at evening will not cure such cases, if the exhausting battle of the brain is still kept up. There must be rest, or a cure cannot be expected and the nightmare banished.

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The false implies the true; chaos, order.

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### HOPE AND RECOVERY.

We can never rightly lose sight of the influence of mind on the material condition. Every sign of life of a material kind rises and falls with some thought, so as to prove abundantly that this thought itself is fraught with life or death to man in his material body. Most people have some sort of notion of an

Several physicians have reported cases of children of deaf mutes, which could hear and see as well as any others.

idea like the true one in this relation, but very many fail to catch the truth just as it stands in nature. In writing of hope in healing, we set aside every false and also every empty hope. The expectation of life and health, for which there is no truthful ground, is worse than worthless. But there is never any good reason why we should employ such expectation. There is always truth enough, so as to give the utmost life possible in any case, but like all other false things, false hope may do vastly more harm than good.

There is the helpless invalid who has been told by a "celebrated" physician that he is "incurable." He is entirely hopeless as well as helpless. But in fact this poor, hopeless being is not actually incurable; he is only incurable apart from hope. Either in himself or in those to whom he looks for aid must hope be created, or he must lie and perish.

In the first place we should put on a hopeful look; we mean a real, rational, well-founded hopefulness. This hopeful look will make the current of vital action start with fresh force, and that in an instant. In the second place, speak in a hopeful voice. Remember this must not be "put on," a shamming voice, but the real voice, genuine, helpful, inspiring hope. Real hope inspires one's mind, and in these tones of voice it enters into another mind. The current of vital action at once responds to this. Everything that gives a feeling of relief goes to strengthen the hope of future health and comfort.

Often we must contend with very formidable influences in maintaining this hope in the patient. But it can be done by the proper tact and patience on the part of the physician, and then the med-

ical treatment shall begin to work the wonders of restoration. It may be weeks or even months before the slightest sign of real advance is made, yet it is at last, by a better respiration, by a cooler brow, by a less restless habit, an indication that your remedy is telling in a desirable way its story of restored health. If this is used well in the way of keeping hope alive and strong, a very precious point is gained. Patients and friends may urge you to name a time at which the cure will be completed. In such cases do not commit yourself to "prophesying," unless you have very good grounds for your prediction. It is not necessary for them to know this. What is needed is a good, clear reason for believing that all is right if the course of treatment is only followed out. It is a wonderfully different thing to treat one who has this hopefulness than one who has lost it.

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#### THE DOCTOR'S LIFE HAZARDOUS.

Next to the locomotive engineer. That's the usual rating of insurance companies. We get so used to it that we forget it.

With his neck broken and his body lying in the road near his home, Dr. Maximilian Muffat, for twelve years a resident of Palatine, Ills., was found dead recently. It is believed he was a victim of a runaway, but there was no witness of the accident. Early in the afternoon the doctor rode into the country to visit a patient, and it was while on his way home that he met his death. The horse is supposed to have run away, throwing Muffat from the carriage.



In general sanguinarine should not be pushed beyond the occurrence of nausea, or the slightest intimation of it.

The maximum daily dose of sanguinarine is about one grain, but in threatened sphacelus it may be exceeded.

# LEADING ARTICLES

## WINTER HOMES FOR INVALIDS.

By William F. Waugh, M. D.



THE leaves are falling from the big maple, the children shiver over the morning bath, but throw off superfluous clothing in midday, and the signs of an early fall are upon us. Our weak ones commence to ask about the coming winter, and the question of where to send them comes uppermost. It is by no means a simple question. Where can the delicate invalid go, where the full benefits of climate can be realized, the maximum of open air and sunshine, and yet the comforts, the conveniences and the pleasures of life be retained, within reasonable reach of the family, and without an impossible demand on the purse?

It is easy to select a climate; the meteorologic records will tell us about the temperature, the rainfall, the prevailing winds, and the sunshine. But what

about the accommodations, the accessibility, the ease of getting supplies, of help in need, the cost, and by no means least, what are the sources of occupation and amusement for the invalid? The ideal climate may be on the peak of an inaccessible mountain, or in the heart of a sandy desert, 100 miles from a human habitation or a railway station, but what are we to do when we get there? Is life of so much worth as to warrant the giving up for it of everything that makes it livable?

The gulf coast would seem an ideal winter residence, with ease of access, proximity to great cities like New Orleans, mild gulf breezes, freedom from storms, etc., and accessibility by the great Illinois Central. But the denizen should be web-footed, for it rains all winter.

The Southwest, Southern California and Arizona present many advantages as to climate; but are pretty far off, the crowd goes there, accommodations are hard to secure, for the "lunger" is not welcome in many localities and too numerous where he is permitted.

The east coast of Florida is for the millionaire rather than for the invalid, and is liable to terrific storms in the winter.

The west coast of Florida below Tampa has not yet been exploited, and would seem to have many advantages. The gulf coast is sheltered from the Atlantic storms, the temperature is somewhat higher, the duck shooting of the finest, fishing and flowers all the year round, while sailing and other outdoor sports make life pleasant for either sex, if not too ill to enjoy such things. Tampa can be reached by rail, and from there south to Key West we suppose sailboats or steamers could carry one to any desired point. But the accessibility is uncertain, and in case of need the friends would have difficulty in getting there; and we have heard that much of this section is rather lawless, and not safe for small parties.

On all these and other locations we would be pleased to receive reports from members of the CLINIC family; and any remarks herein made are subject to correction by those on the ground. And it would be a pleasing and appreciated novelty if our correspondents were to give their views from their patients' standpoint and not from their own. A very bright contemporary, speaking of a paper read by a great city surgeon before a medical society, said the title was: "How to Wire a Patella Fracture," but it should have been: "How to Wire for Me for a Patella Fracture."

So, most of the reports made by the local doctors on climatic resorts seem to say: "Send me all the patients you can." If they would only tell us what we know very well already, that their climate is not suited for all forms of disease, and

then tell us what we want to know, what diseases it is and is not suited for, we would be able to act more intelligently, and would feel some confidence in sending our patients to them. As long as these reports claim that the localities are each better fitted for the treatment of every disease under the sun than any other section of the earth's surface, we cannot take them seriously.

Personal knowledge gathered during many years' visits and sending many patients there, affected with many kinds of disease, enables us to speak with some confidence of Atlantic City as a resort for the cold season. As a climatic resort it is cooler in summer and warmer in winter than the inland cities of the same latitude. During the season, July and August, the crowds of pleasure seekers (amounting to 300,000 one day in August) render the city unsuitable for invalids, as the resources of the 800 hotels and boarding houses are taxed to the utmost. But when the rush is over the city quiets down, ample accommodation can be had at any cost, from \$3.00 a week up, it is said, and the uproar of the cheap excursionist no longer renders rest impossible. Many of the attractions continue throughout the year, and a permanent population of about 40,000 insures ample supplies, occupation, diversion and company.

The following extracts are taken from an article by Dr. W. Blair Stewart, of Atlantic City, presented to the American Medical Association when it met at this place in 1900:

"The purest air in nature is that found on the high sea after traversing hundreds and thousands of miles of pure sea-water, uncontaminated by smoke, dust, and the exhalations of cities. Saline



Strychnine increases the reflex excitability of the spinal cord and increases the general and special sensibility.

Strychnine raises the arterial tension, and stiffens any relaxed portions of the circulatory apparatus strongly.

mists and fogs clarify, purify, ozonize and vitalize the air. Sea-air is tempered by its surroundings; in summer it is cooled by radiation from the lower water-temperature and in winter warmed by the higher water-temperature. Moisture is also taken up by it and a doubtful infinitesimal per cent of salt. The so-called trace of iodine is very questionable and cannot be positively demonstrated. Sea-air is classed as an alternative by some, but not on account of its supposed iodine.

"Outside of an island in mid-ocean, Atlantic City is probably situated in the best location for pure sea-air; better than any point on the eastern coast of the United States. Its geographical location is on an island of pure sand, five miles from the mainland, and twenty miles seaward of the head of tide-water, at a point of a bend in the coast line, thirty miles northeast from Cape May and seventy miles from New York Bay, where the fresh waters mingle with the ocean. It is surrounded by a body of salt water, uncontaminated by fresh water streams, and entirely free from malarial or any other paludal poisons. The salt meadows between the island and the shore are overflowed by tide-water twice in twenty-four hours. The gulf stream is about 125 miles from the shore and tempers the surrounding sea-water and the air, so that in winter it is from 10 to 20 degrees warmer and in summer from 10 to 20 degrees cooler than interior cities. High winds are less frequent than at other points. Sea-air mixed with sea-fog is not injurious to most cases, as it contains no noxious elements, is non-irritant, and quite equable in temperature.

"The two great effects of sea-air are upon the nervous system and digestion. Coming from the dense air of cities and the rare air of high altitudes, respiration and heart-action are slowed, at once reducing the consuming energy of the body and lessening waste. Sea-air is dense and ozone-laden, and, therefore, increases the oxidizing power of the blood, and is nature's best remedy for anemia. It assists in fighting the malarial parasite, and will, in time, eliminate the poison from the system. Night air here is not injurious to these cases. Patients with heart-disease do well here, as less work is thrown on that organ and oxidation is carried on better than in higher altitudes. Cardiac dropsy sometimes improves for this reason.

"Convalescents from disease and those who have been debilitated, overworked, and confined to rooms and offices, invariably improve if they live hygienically and follow proper dietetic rules. The effects of sea-air are stimulant at first, and add vigor and tone. Appetite is increased decidedly and a drowsy feeling is almost sure to follow its satisfaction with a refreshing night's sleep. Many business men come to Atlantic City periodically to get a full night's rest and sleep. Strumous and tubercular children and adults will improve rapidly if they live in the sea-air and follow proper dietetic rules. Many such cases have been apparently cured here with little medicine. Tuberculosis in its early stages is amenable to treatment in sea-air and sunlight. Such cases should invariably act under physicians' advice. Consumption in its latter stages is best at home, as it will not improve here. Many cases of bronchitis are permanently cured by sea-air. There is less danger of pul-



Like all the bitter tonics strychnine sharpens the appetite, and it further renders the sense of taste more acute.

Strychnine, any of its salts, stimulates intestinal and gastric peristalsis, and relieves flatulence and constipation.

monary hemorrhage in sea-air at sea-level than in high altitudes, owing to the fifteen pounds' pressure to the square inch here and the density of the air; in higher altitudes the internal blood pressure is not so readily equalized at first and often gives rise to hemorrhage. Many cases of asthma and emphysema do well here, while others are made worse. Trial only can demonstrate. Hay fever almost invariably disappears in sea-air, but when the wind comes from the land it may be aggravated.

"It is a mistaken idea to think that one cannot catch cold at the seashore, but one coming here with an acute cold will throw it off more rapidly than in the interior. Some people cure their colds by sailing every day and living on the boardwalk. Hot and close rooms are to be avoided at the seashore, as they are productive of colds and depression. Laryngitis and acute catarrhal troubles do well at the shore if properly managed, but do poorly if smoking, late hours and carousing are encouraged. Acute lobar pneumonia is rarely seen at Atlantic City, and when it is it usually runs a very mild course. Cases of Bright's disease and diabetes in the early stages do well. Contrary to the writings of some, many cases of eczema and skin troubles improve perceptibly and are cured in sea-air. This is particularly noticeable in young strumous children. Digestive troubles are very amenable to treatment if proper rules are followed.

"Neurasthenics do particularly well in Atlantic City in the fall, winter and spring months, but not in July and August, when the large crowds are here, unless they go to parts of the island that are isolated. Insomnia soon leaves and nerve tone rapidly improves. Melancholia

and insanity are usually aggravated by sea-air. Hysteria may or may not be improved, according to the cause. Neurasthenics may find the first few nights here unpleasant and restless, but these soon give way to sound sleep. These cases should be closely watched to prevent abuse of surf, hot and cold seawater baths."

It is unwise to send hemorrhagic consumptives to the seashore. With diabetics and nephritics it is always risky; some do well, but others are apt to be made worse. Emphysema does badly, and chronic respiratory maladies with free secretion are at least not benefited; while those with dry catarrhs, little secretion, are greatly relieved.

In spite of all rules some do well and others ill, when the contrary is expected. We have long been in the habit of judging largely by the effect of residence at the shore on the sleep. If the patients sleep more than usual, or even excessively, they will be helped; but if they do not sleep as well as at their homes, send them to the mountains.

Among the physicians of Atlantic City may be found men of the finest attainments, in whose hands patients can be safely trusted, who would not keep one there when a change would be beneficial. A number of them use the alkaloidal remedies, and to them patients can be consigned. Among these we would mention Drs. Philip Marvel, L. D. Balliet, Clara L. Bartlett, C. Garrabrant, Edward Guion, J. R. Hood, J. A. Joy, B. R. Lee, M. S. Lyon, H. D. Marcus, Emery Marvel, M. L. Munson, A. B. Shimer, M. L. Somers, M. E. Townsend, J. W. Hughes and L. H. Bewley.

Several of the leading pharmacists keep these remedies in stock, especially



When the tissues of the throat threaten to fall into sphacelus or gangrene give sanguinarine gr. 1-12 every half hour.

In dyspepsia with catarrh and relaxation or dilatation of the stomach and bowels, strychnine is very efficient.



Wright's Pharmacy and W. F. Ridgeway.

Many hotels and boarding houses keep open the year round, among them being Hotels Anchorage, Belmont, Brighton, Dennis, Haddon Hall, Seaside, Morton, Strand, and Windsor.

To recapitulate: Before sending patients away it may be well to recollect that Atlantic City has the following advantages:

It is easy of access.

The water supply is ample and pure.

It has ample accommodation for all classes of patients, at all prices.

It has good doctors, who use modern methods and remedies.

It has good, well-stocked pharmacies, with the best of pharmacists.

It has plenty of amusements, occupations and company for the invalid.

Any and all needs of the sick can be as easily fulfilled as in Chicago.

The winter climate is milder than in the great northern cities, and in cold or wet or windy weather ample accommodations in the way of warm sun parlors are furnished.

Sea-water baths, hot or cold, can be had at all seasons; remedies of very great value.

The range of affections for which this climate is suitable is very large.

There are opportunities for people who have the strength and means to engage in business, or to speculate in real estate, that are very attractive. It was strongly borne on the mind of the writer at a recent visit that the constantly increasing demand for land for the spread of the city was among the few certainties in the real estate business. Persons who bought land ten years ago were selling at an advance of about 500 per cent.

Fishing, crabbing, shooting, sailing, deer hunting, fox chasing, are among the diversions for those who have the health.

If anything be required that the well-stocked shops of the city fail to supply, or if my lady needs a day's shopping at Wanamaker's, the three railroads carry her to Philadelphia in an hour, and since the new bridge over the Delaware has been built, into the heart of the shopping section.

Chicago, Ill.

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## ALKALOIDS IN THE TREATMENT OF FEVERS.

By S. B. Miller, M. D.

Read before the Wyoming State Medical Society which was held in Cheyenne, Wyo., Sept. 9-10, 1902.

**P**ROGRESS is never uniform, never general. It goes by leaps and bounds, advancing and receding, winning a foothold here and slipping back there. And when a permanent advance has been won at any point, it may be a long period before the contiguous territory ceases to be hostile land, in which it has merely established an outpost.

In the science of medicine the pathologist has carried our banner well to the front; but the materia medica has not moved forward correspondingly. It is with the intention of arousing some activity in this line that I present to you to-day my plea for the more general use of the alkaloids.

Pathology says: "What do you know as to the effects of drugs on the morbid

In the debility of convalescence or of anemia, strychnine is one of the best and safest of the tonic group.

In dyspepsia from improper food, or the abuse of alcohol, strychnine is a master medicament, after evacuation.

conditions of the tissues?" And while awaiting the answer to this question we have settled down in the treatment of fevers, especially typhoid, into an expectancy as vicious as it is impotent for good.

Why physicians who act as expectors, who sit still and let the disease run riot through the patient's body, should expect to be employed or paid, is one of the things no man has yet been able to explain satisfactorily to the patient at least. If I must suffer the pangs of disease, why should I pay anyone for simply acting as a spectator?

The doctrine I present to you to-day contemplates a different attitude of the physician, and one more in accordance with the views of his employer. He is to actively intervene in the case, every moment of its existence, from the time the first micro-organism lit on the patient's tonsil until he is restored to his place in society.

Accepting at their full value the conclusions of modern science as to the causation of disease by micro-organisms, we shall base on them our system of treatment. There must be an avenue by which these pathogenic germs obtain access to the human body, and in the tonsils we find a point less perfectly protected than usual.

The connection of tonsillar inflammations with rheumatism has been abundantly shown, and this has opened our eyes to the fact that a similar connection exists with other infectious maladies. In all epidemics of the eruptive fevers, typhoid, pneumonia, etc., many cases occur of tonsillar inflammation, some followed by attacks of the prevailing epidemic, and others not, and we find that many of those so affected also escape all sub-

sequent epidemics of that malady. The only explanation as yet offered for this curious sequence is that the patients have been affected by the malady just enough to render them immune against it, though not enough to cause a typical attack.

This being the case, it behooves us to pay special attention to the tonsils, and to meet every indication of inflammation of these organs with effective germicidal applications, such as solutions of salicylic or boric acid, hydrogen peroxide, resorcin, the mineral acids, etc. The principle is the important thing, the selection of a remedy can be left to individual choice. But the chlorides have long been noted as effective remedies for the throat, and the domestic gargle of salt water does not merit contempt. Possibly none is more efficient than chlorine water, readily prepared extemporaneously by placing in a 4-ounce vial a dram of powdered potassium chlorate, adding a dram of strong hydrochloric acid, and as the fumes of chlorine fill the bottle adding water to make four ounces. A teaspoonful of this in an ounce of water, every two to four hours, is sure death to every microbe with which it comes in contact.

But suppose the microbes have gotten past the door, and effected a lodgment in the body. Then we have the period of incubation. During this, what is going on? The invaders are gathering their forces, multiplying, so that in a given time they may make their grand assault upon the vital forces. In the original settlements made by them there is a scene of the most intense activity.

But what are we doing in the meantime? Nothing. What are we waiting for? In his struggle with the Catalans,



Many cases of sick headache are amenable to strychnine, if the elimination and ocular indications are seen to.

Persons liable to periodic headaches, frontal or neuralgic, find strychnine in moderate doses a good preventive.

St. Cyr was accustomed to withhold his hand until the enemy had gathered into an army, that he might destroy it at once, instead of wasting his energies pursuing the elusive bands of guerillas. But we have no such resources for combating essential fevers. We are as powerless as ever when the grand attack is delivered, and still we have to maintain our pose of observation.

If the microbes are few in numbers during the incubative period, if they are not yet ready to deliver their blow, it seems the part of wisdom to choose this time to strike them, when they are weakest. But can we do it? Are there any weapons that we can bring to bear upon them at this time?

There are two that have been proposed for this purpose. One was introduced by some obscure country doctor in the West, who had observed its good effects in the treatment of snake-bites. This is *echinacea angustifolia*. This has been tried by many physicians in the whole range of infectious maladies, and it is confidently asserted that it is a systemic or hematic disinfectant, combating the specific causes of these maladies, of every sort. In health it seems to have little if any effect upon the bodily functions.

Another remedy is sulphydric acid, in the form of calcium and arsenic sulphides. Either of these is to be given in small and rapidly repeated doses until the body is saturated with the drug, as shown by the odor of the acid on the breath and the skin. In some cases saturation is denoted by the occurrence of nausea. When this occurs the doses are to be given less frequently, just enough to keep the body in the state of saturation.

The theory of its action is simple enough, the existence of any pathogenic micro-organism in the body saturated with the sulphides is impossible. Keep up this saturation for a week, and no living bacteria can be found. It matters not what may be the organism, all fall before this potent destroyer.

Let me add that in spite of the bad name given it by the older physiologists, there is absolutely no danger in this medication, and no harm accruing to the user. Calcium sulphide has been administered to adults with gonorrhea up to 40 to 50 grains a day, with only good results; and to infants with diphtheria in doses of gr. 2 every hour, with like safety. In these cases, however, there may well have been a neutralization of the drug by the toxins of disease; but in seeking to temporarily inhibit the sexual function, calcium sulphide has been given to masturbators in similar doses, with success, and no sign of toxic action.

These methods are at your service, if you desire to try them. It is certain that many physicians in active practice are using them every day, and are enthusiastic in their praise. Moreover, it is stated as a fact that no mosquito, flea, bedbug, louse, redbug, or other insect parasite, will bite a person saturated with calcium sulphide; so that there seems much reason to believe that the parasites of microscopic size should be no less able to withstand its influence.

The next point I wish to discuss in the treatment of fevers is that of intestinal sepsis. This is a matter deserving grave consideration. The contents of the bowels are within the bounds of the body, and yet not in it; in so far as that they are outside the influence of its vital



In habitual constipation strychnine to stimulate intestinal peristalsis forms part of every good combination.

It is questionable whether any drug equals strychnine for a dilated heart as useful and safe for long taking.

forces. They consist of highly fermentable material, with the requisite heat and moisture, and the constant addition of fresh material to keep up fermentive processes. The safety of the body lies in two factors: the constant movement forward and dejection of these matters, and the disinfecting action of the various digestant fluids, especially the bile.

That the first of these is uncertain requires no proof; cases have been reported in which persons have ejected from the bowels substances swallowed seven months or more previously. What possibilities in the way of decomposition and autotoxemia exist here. The practice of beginning the treatment of every case by completely emptying the alimentary canal is one strictly in accordance with modern science, and supported by common sense as well as by clinical experience.

The influence of the liver in disinfecting the bowels has been largely overestimated. Recent investigations have shown that the bile is an excellent culture ground for various micro-organisms, and that the colon bacillus may in the gall-bladder acquire pathogenic powers. The typhoid bacillus also retires there for recuperation, and descends thence into the bowels with increased virulence; and this is believed to explain certain relapsing cases of the fever. Besides, one of the invariable results of fever of all sorts is to decrease or suspend entirely the secretion of bile, and of all the digestive fluids, so that the means of disinfection is cut off at the very time it is most needed.

From this it is most evident that in every fever a certain proportion of the symptoms is attributable to the decomposition of the contents of the bowels,

and the absorption of the toxic substances thereby formed. The use of intestinal antiseptics is therefore a routine procedure in every case of fever, of whatever nature.

And when these agents have been given in sufficient quantities to free the stools from all unpleasant odor, it will be invariably found that about 40 per cent of the fever and other symptoms will have subsided. Especially the muscular aching, delirium, headache, restlessness, general malaise, neurotic phenomena, insomnia, and other general symptoms, will be moderated or entirely removed, and when 40 per cent of any febrile attack is dissipated, it must be a pretty poor sort of doctor who cannot handle the balance.

Just here let me ask you not to tell me that the alimentary canal cannot be sterilized. We all know that; but nobody has claimed that such complete sterilization is essential, and the results of the actual use of this system are amply convincing as to its utility, explain it as you please.

We now come to the treatment of the fever, *per se*; and here again our practice is based on the soundest principles of modern pathology. For it is certain that the first step in every inflammation is the derangement of the circulatory equilibrium, whereby an excess of blood appears in the inflamed part, with necessarily a corresponding anemia elsewhere. Now, if we remove this excess of blood from the inflamed part, and restore it to the parts that have too little, it is obvious that the subsequent steps of the attack, diapedesis of white cells, extravasation of blood, etc., cannot take place; and the malady is stopped—jugulated.

We may accomplish this in two ways

In bronchitis with weak respiratory power or dilated bronchi, strychnine contracts relaxed tissue and exalts sensation.

For the night-sweats of pulmonary consumption the relaxation of tissue is amenable to strychnine, to follow atropine.

—by increasing the tonicity of the dilated vessels, or by relaxing those that are contracted and empty. The first object may be secured by giving the powerful vasomotor tensors, strychnine and digitalin; and these constitute the chief means employed by many leading physicians in the treatment of pneumonia. The second may be fulfilled by the administration of the vasomotor relaxants, veratrine and aconitine; and the first named, under the form of tincture of *veratrum viride*, is perhaps the most popular remedy to-day in the United States for pneumonia.

Whichever is chosen, the same object is attained—the restoration of circulatory equilibrium. It is asserted that both these processes can go on together, the cells whose tonicity is below par taking up the tensors, while those in a spastic state absorb and utilize the relaxants.

At first sight this seems unreasonable, but when we reflect that every living cell in the body selects from the blood what elements it stands in need of, and rejects the rest, there is no special reason for refusing to credit them with a similar power as to the selection of medicines. And if it comes to that, is it so easy to draw the line between foods and medicines?

Besides, those who have put this theory to a practical test are unanimous in their reports that the results are better than when either the tensors or relaxants, stimulants or sedatives, are employed alone.

The foregoing principles form the basis of the modern treatment of fever, *per se*. Each special form of fever may require special additions or not, as the case may be; such as quinine for malaria, salicylic acid for rheumatism, pilo-

carpine for erysipelas, etc. And in every case the duty of rendering the house and vicinity hygienically clean, of enforcing a proper administration of the sick room, of guarding against the spread of the infection, remains as imperative as of yore. In fact, the physician who believes in utilizing the resources at his disposal in the treatment of fever will find his occupation strenuous enough to satisfy the most exacting.

But by the use of the alkaloids uncertainty gives way to certainty. And exact dosage is easily obtained. When an alkaloid is given, but one effect may be expected, while in giving tinctures and fluid extracts, all of which contain several differently acting principles, disappointment is too often the result.

The practice of the healing art will never become an exact science until the use of the cruder preparations gives way to the active principles of plants as represented in the alkaloids. And to-day, when alkaloids of most of the drugs used by the medical profession are readily obtained, there can be little excuse for not prescribing them.

In closing I think I am safe in predicting that the time is not far distant when tinctures and fluid extracts will be relics of the past, and all advanced physicians of the day will be using the arms of precision as represented in the alkaloids.

Laramie, Wyo.

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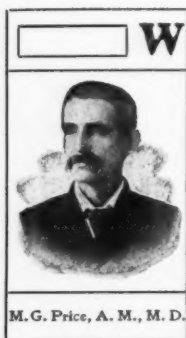
Certainty as to our therapeutics gives us firm ground for one foot. We can then search for a firm footing for the other, in the uncertainties of pathology.  
—Ed.

Strychnine is so good in depression from mental overwork that it encourages the victim to continue till he drops.

Strychnine enables a man to go on overworking, and holds him up; but never let him have the prescription in his own hands.

## WORMS.

By M. G. Price, A. M., M. D.



WE HAVE received every number of the CLINIC from 1896 to 1902, inclusive, and we owe it nothing except good will, and always expect to be in debt on that score. This morning we were engaged in a little retrospect, comparing '96 with any volume since, and indeed it is a shabby-looking affair, typographically speaking, but every year has witnessed a wondrous growth, from a 36-page pamphlet to numbers which contain 86 to 111 pages monthly, in 1902, representing a huge volume of 1,332 pages annually. Typographically and literarily the contrast is infinite.

We had occasion to look up the subject that heads this communication, and made a search through all the numbers in our possession, and indeed the literature was scant. In Vol. 3, worms are mentioned once; in Vol. 4, once; in Vol. 5, once; in Vol. 6, twice; in Vol. 7, three times. American Alkalometry, Vols. 1 and 2, make no reference to the subject. Hence this is not an "oft-repeated theme," and we may be pardoned for referring to it in this connection, not only from this cause, but from the additional cause that it is a very frequent (?) ailment among children. Each old grandma, with a knowing leer, will wisely survey the afflicted little one, and authoritatively pronounce it "worms," no matter what the trouble may be.

The doctor to be in the fashion, but

who of course knows better (?), agrees in the diagnosis. It is really alarming how many troubles are thus diagnosed. We may almost practice a month among the children, and make no other if we are willing to follow suit; but if we have a "head of our own," and dare contrary the "powers that be," we may find out other diseases that infect the children, but we'll not be popular. But in how many cases diagnosed "worms" do they fail to materialize? Nearly all. The mother wants to "see" them. She'll tell you they never put in their appearance, and ask you, "Doctor, why didn't they come?" And this is gravely answered, "The medicine cuts them up so you can't see them."

We want a word more on this when we write of treatment.

The ova are introduced into the body in the food and drink, and the worm is developed in the intestines; from one to several hundred worms may be found inhabiting the host. They occupy chiefly the smaller portions of the intestines, but are migratory, having been found in the stomach, the gall-duct, and we recollect very well when we were a child (1865) coughing up one 8 or 10 inches in length. Whew! We cringe to think about the thing now. The round-worm is much more frequently found in children over three years of age than in infants or adults.

We said above that every ailment in children was diagnosed as "worms," and there is some show of reason for it, for the symptomatic manifestations of this pest are manifold: Capricious appetite, sometimes ravenous, sometimes wanting, irregular feverish attacks, dis-

The tremendous power of strychnine in relieving the fatigue of overwork should be a professional secret strictly.

If a man who has worked to the limit keeps up under strychnine till he drops, what have you left to restore him?



turbed sleep, bad dreams, grinding of teeth, pain in the stomach after taking food, picking the nose, passing from the bowels a large quantity of mucus, and the passing of worms. And this last sign is the only pathognomonic one that we have mentioned; all the rest may be found in most forms of intestinal catarrh. These parasites sometimes cause fits in children.

A case is mentioned in which a weakly child, 5 years old, vomited a round worm. On being given a dose of oil the child died next day. At the autopsy the ileum was found occluded by a tightly wound ball composed of eight roundworms; forty-two worms in all were found in the intestines.

The mother likes to see the worms evacuated, and what remedy will do this certainly? Santonin is the specific, but very frequently we have to report "'em cut up." We do not discredit santonin, and nearly always find the child relieved. Then we say, "No difference whether you see the worms or not, so your child gets well."

The exact dosage is said to be, at 2 years, gr. 1-4; 6 years, gr. 1-2; 12 to 15 years, gr. 2.

We have been using a little granule for several years, made by the A. A. Co., which "brings 'em." One mother told me she got a "wash-pail full" from her child by its use. It is called a worm-remover, and is composed as follows: Cheloni gr. 1-6, santonin gr. 1-10, and podophyllin gr. 1-35. For a child from 6 to 10 years old, give three granules at night and one granule every two hours next day until effect. Vary dosage according to age and condition.

As far as the action of santonin and podophyllin are concerned we under-

stand it, but cheloni is a remedy with which we have little acquaintance. Dr. Waugh says of it: "Laxative, tonic, anthelmintic. Acts specifically in the mucous membrane of stomach and bowels; in dyspepsia, jaundice, constipation, ascarides, etc." This is all the reference to the drug we can find in looking over several works on materia medica, but in some way or other we have better results from it than from any other remedy we use, and it gladdens our hearts to hear the mothers say: "I tell you, doctor, you fetched 'em that time sure."

Mosheim, Tenn.

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Here is what the materia medica have to say on chelone glabra, whence comes cheloni: Hare, Shoemaker, Cushing, Sollmann, Caspari, Liebreich, Wood, Butler, Ringer, Nothnagel, and Brunton, nothing at all; Ellingwood, nothing, not a mention.

Scudder: "Tonic, stomachic laxative, anthelmintic and hepatic. One of the mildest, purest and most congenial tonics and stomachic agents in the materia medica; unusually acceptable to the stomach, valuable in anorexia, languid or atonic states of the digestive organs, promotes appetite and facilitates the digestive process. In confirmed dyspepsia, especially with torpid bowels, it answers a good purpose, as it does in chronic diseases in general attended with debility."

Webster: "Mild tonic, applicable to dyspepsia with hepatic torpor. It improves the digestive power of the alimentary canal, and stimulates bile-secretion. Valuable tonic after malarial fevers, promoting functional activities, especially if secretions have been locked up

In all paralyses after irritation subsides strychnine restores to the benumbed nerves their active functions.

The time to give strychnine in paralysis is after the absorption of debris has freed the nerves from encumbrance.

by quinine. Large doses act as a gentle purge. Chelonin is an active parasiticide in the alimentary canal, especially efficient in the destruction of the lumbricoid."

This comprises the literature at our immediate disposal. Balmony is a nice mild tonic, laxative also, with a gentle

persuasive influence over the liver, but the one specific effect it exerts over the lumbricoid is only mentioned by one author. That it has this effect, however, seems clear from Dr. Price's report, and many others we have received. Let us settle the matter by a general trial and a summing up of reports.—ED.

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### SOME ANOMALIES IN PRACTICE.

By Wilbur F. Sterman, M. D.

#### CASE ONE.



VERY early on the morning of March 28, 1901, I was called to attend a woman in labor, three miles in the country. Upon arrival I found that the child had been born soon after the messenger had been sent for me; in fact, before he had gotten fairly on his way. About an hour and a half had elapsed since the child was born, and, together with the placenta, it was lying apparently in good condition, between the mother's legs, and no one in the house with nerve enough to tie and cut the cord. This, of course, I at once proceeded to do, cleaned and dressed it, in the usual manner, with equal parts of boric acid, iodoform, and Campho-phenique, and left the mother and child in good condition, so far as I was then able to discern.

On the 29th the husband reported that the mother was O K, but the cord was bleeding. I told him to increase the pressure on the binder and gauze dress-

ing, gave him a solution of hydrogen-dioxide to saturate the dressing with, and told him to report to me if necessary.

Next day he reported no improvement, and I went out. Imagine my surprise to see the child withered and wrinkled, and apparently mummified alive. The cord was tied tightly just as I had left it, one-half an inch from the body, but it was raised, distended, and had the appearance of a large, ripe, red cherry. The dressing and clothing were saturated with blood that had that peculiar odor and appearance of the menstrual discharge, was very offensive, and the upper clothing was stained a saffron yellow with hemoglobin, and so was the skin over the entire body. The temperature was 94.8 Fahrenheit, while the pulse was very, very feeble indeed, and the child looked a hundred years old.

I found the exosmotic action in active progress throughout the distended cherry-like stump of the cord, and all the strongest astringents and hemostatics would only partially control it for an hour or two at a time. Next day the temperature rose to 102.5 in the forenoon, and the little one died with an intermittent, feeble pulse, in the afternoon about 3 o'clock.

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Ataxia: HgI<sub>2</sub> gr. 1-67, strychn. ars. gr. 1-30, gold and sod. chlor. gr. 1-50, zinc chlor. gr. 1-67; hourly.—Radue.

Atropine is indicated in infantile colic, and in the majority of cases of infantile constipation.—Niles.

I can find no history of such a case, and am not certain regarding the etiology or pathology, and simply have my opinion, and would like to hear from some such pathologist as Welch, Hektoen, or Vaughan.

I consider it a case of exsanguination due to sapremia and hemolysis, from absorption of ptomaines from the attached placenta, as the circulation waned from separation from the uterine walls, and perhaps slightly after its immediate expulsion.

Bowels and kidneys both acted freely from the start. The intense stain and depletion was entirely due to the loss and dissemination of hemoglobin, and I can account for it in no other way.

## CASE TWO.

In this section of country, malaria in a masked and atypic form might not be suspected, yet we have it, as the following case will show:

December 23 last I was called post haste to see a patient whom I found apparently suffering with hemiparesis of the left side. The patient was a woman 50 years of age, mother of a large family, strong and robust in appearance, with no neurotic family history, and had passed the menopause safely six years before.

Three years ago she had a similar attack, and it had been pronounced a paralytic stroke by the attending physician, from which she had very slowly recovered, yet leaving a weakness in this same side.

Pulse 96, temperature 100 plus. Face flushed, and the entire family frightened in regard to the so-called "second stroke." All over the left side there was partial loss of sensation and almost total

loss of motility, with ankle clonus absent, and patellar reflex subnormal. I cleaned out the bowels thoroughly, stimulated the liver, and exhibited the Triple Bromides and hyoscine hydrobromate for temporary, and gold and arsenic bromide with strychnine hypophosphite for permanent treatment.

New day at the same hour she had a similar attack, after showing marked improvement in the early morning, and this in turn was repeated on the day following. I then (on account of the periodicity manifested) put her on Warburg's tincture with the strychnine, and she has had no symptoms nor further trouble since.

## CASE THREE.

A boy, 17 years old, strong and healthy, came to the office, stating that something had broken loose in the upper part of the abdomen and was dropping down inside of him. I laughed at him, of course, but auscultation partially confirmed his statement, and percussion revealed an accumulation of fluid in the hypochondrium and mediastinum, and the pressure was interfering with the cardiac action and respiration. Percussion in the triangle, above the transverse colon, was very similar to percussing a moderately filled hot-water bottle. The apex beat, sounds and rhythm of the heart were normal, but the pulse rate was accelerated, though not to any marked degree. Temperature normal, bowels somewhat constipated, tongue clean, appetite good.

Diagnosis: Peritoneal catarrh, with occlusion of the foramen of Winslow, finally giving way to pressure from above and thereupon disseminated below.

Strychnine hypophosphite is the remedy for infantile paralyses, and should be cautiously pushed to full effect.

Writers' cramp is amenable to strychnine as to no other remedy, if due rest of the affected muscles is secured.

Treatment: Opened the bowels freely and persistently every day with hydragogue salines, and gave Merrell's "Ferro-Salicylate" from true oil of wintergreen every three hours for three days, and four times a day thereafter, combined with a tonic diuretic.

Results good from the start.

#### CASE FOUR.

Veteran of the civil war, carpenter by trade, 60 years old, was brought home from the country sick, April 19. Found him with an intermittent pulse (chronic, however, in this case), moderately full and strong, temperature 104.2, bowels constipated, liver enlarged, tongue coated, and no pain excepting headache, bone-ache and general soreness.

On the following day, after a thorough evacuation of the bowel, his temperature dropped to 101, and the second day to 99.

At this time an acute pleurisy developed between the liver and lower border of the right lung, and his temperature crept back to 101.2. The inflammation slowly extended upward into the posterior right lung, involving the lower and middle lobes with a pleuro-pneumonia, but the temperature never again went to 102, and the left lung was not involved in any manner at any time. Over the affected area Antiphlogistine was constantly kept, and the internal medication consisted of resorcin, sanguinarine nitrate, methylene blue, digitalin and quinine bisulphate.

The disease was by this treatment held in abeyance, and the only unfavorable symptom at any time during the course of the disease was slight incoherent mutterings during otherwise normal and restful slumber.

On the morning of the eighth day I

For local paralytic affections of every description strychnine is the first remedy and should be pushed to full effect.

found him with a normal, full, strong, steady pulse, a normal temperature, and for the first time buoyant and hopeful, and feeling assured of his timely recovery. In six hours I was called to find him delirious, bowels tympanitic, pulse strong and steady to the last half hour, temperature 102, which steadily declined as he gradually sank into a semi-comatose condition, and his life light slowly went out, respiration failing first, and in twelve hours from the morning visit he was dead, with no further involvement of either lung.

What killed him?

#### CASE FIVE.

Called in a "hurry up" manner, I was not allowed to secure a team, but requested to "climb in" behind a span of mules, and was driven in a gallop all the way for six miles into the country, while people meeting us supposed that both the doctor and the driver, like the English lord, were "very much elated indeed."

Arriving at noon at the farm house, I found a rugged, chubby little boy, 6 years old, in rigid constant spasm, face flushed and crimson, eyes rolling and wild, sometimes set, head somewhat retracted, and tossing, with both hands clawing the air.

Bowels very tympanitic, respiration labored and rapid, pulse 160, axillary temperature 105. History of robust health until the last week or ten days, during which time he had not been feeling well, had been having hot, feverish flashes, alternating with chilly spells, and bowels had been torpid and sluggish for days.

Forty-eight hours previous a cathartic had been administered, the bowels had

In lead paralysis the metal should be eliminated and strychnine enough given to restore the normal tonicity.

moved out freely, his appetite had returned, and he had been given his "fill" of cooked dried sweet corn; after which his bowels never moved, he grew steadily worse in spite of all internal treatment, enemata and other effort to move out the offending material, and died that night in less than twelve hours from the time that I first saw him, with a temperature steadily rising to 109. How is that for a case of autotoxemia?

## CASE SIX.

Slender, anemic woman, age 20, married three years, lost one healthy child 1 year old, six months ago. Menstrual flow properly re-established, regular and painless, but the flow persisted in spite of the internal administration of uterine tonics, vasomotor constrictors and hemostatics.

Visual examination revealed a hyperemic vaginal mucous membrane and an angry, congested appearing cervix uteri, with every indication of an induced abortion. The history was negative, however, for the flow had been not only regular, but excessive and weakening, and the parents were both very anxious to have another child.

Uterus was practically normal in size, and so was its cavity, and suspecting an acute endometritis due to retention of clots, shreds or polypi, I began stimulating applications to the endometrium and put her on an emmenagogue tablet every two hours during the day and a dram of f. e. ergot (Squibb) at night. These threw out some shreds and clots as anticipated, but no polypi, and she got better, got out of bed for a few days, but never ceased entirely to flow.

In a few days she was down again, and as bad as ever, and at midnight the

husband came for me. She had no pain, no tenderness nor tympanites at any time, but bimanual examination revealed a hard lump in the left tube, very close to the uterus.

I informed them there was something there that must come away early in the morning, even if it demanded an operation; took her temperature (suspecting acute pyosalpinx) and found it normal, pulse slightly accelerated and volume lacking, to be sure.

Next morning the lump had disappeared. The clots and shreds had been discharged, and a fetus about three inches long was among them. Hemorrhage had ceased, and she made a rapid and uneventful recovery. I report this as a most happy termination of the most atypical case of tubal pregnancy I ever saw.

Winterset, Iowa.

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Such a case as the last is certainly an instance of the kind interposition of Providence in favor of the doctor and his patient. And yet it is just such lucky cases that win the approbation of our patients and make a reputation. In fact, I would rather have the reputation of being a lucky doctor than that of being a skillful one, as far as the pecuniary results are concerned. After all, what is it wins the people's confidence? The kind heart, the earnest effort to do one's best, the close attention paid, and if to this be added the reputation of good luck, it weighs far more than the ability to make a diagnosis or to use the microscope never so wisely.

As to case 5, why do our surgeons neglect such admirable opportunities to open the abdomen and remove the offending contents of the bowel?—ED.



For muscular atrophy inject the hypophosphite of strychnine in full doses into the affected muscular tissues.

In one case of acute locomotor ataxia, with typical symptoms, recovery was secured by strychnine pushed to full effect.

## MEDICAL AND SURGICAL EPIGRAMS.

By Lucien Lofton, A. B., Ph. G., M. D.



THE objective point of a doctor's life is the goal wherein disease, dirt or decoys do not exist.

The Latin language may be considered a dead language, but it has saved the lives of thousands.

Without a good helpmeet a doctor's years would miscalculate, for to woman he owes more than to medicine.

The deepest cut sometimes made by a surgeon is with his tongue, for he who cuts with scalpel is amenable to the laws of cure, but he who indiscreetly talks, cuts more deeply than does the sharpest catlin.

The buccinator muscle in some doctors is so splendidly developed that it is not unlike the glutei maximi of a reformed "cop."

The holy friendship existing between some doctors, especially if they represent the same specialty, would make Damon and Pythias holler for rear seats.

There are more sheep in medicine than one would imagine, not that they are often shorn, but that miserable disposition to leap after the other fellow, right or wrong.

In gonorrhea, chancroid and chancre, the towel, the bed linen and the lavatory are the most abused modern conveniences with which the layman has to deal.

There are many strains; strains of malady and financial strains, but the gonorrhea strain is daily told to you in a strain unfit for belief, but not unfit for use.

The tempest of a modern orchitis is no idle paraphrase.

Of all acute senses, there is none so

appallingly acute as the sense of touch. Ask the man who has been up against HNO<sub>3</sub> behind locked doors with his back to the wall.

The outburst of burning love with which a chancroid patient holds his doctor is too deep for repetition.

The running issue of the good book is no transparent fable of the young issue of your record book.

The hurricane of croton oil is not half so fast as is the married man whose conscience is beclouded by illicit embrace.

Life is never so sweet to anyone as it is to a poor consumptive. There is more genuine cheer in these decaying and tottering frames than all the exotics of frolicsome youth.

Doctors do not always bury their mistakes, try they ever so hard to rid the world of vexatious nondescripts.

The lips of ungrateful patients are always silent as the tomb in the presence of real necessity.

It is just as cheap to secure the services of a scientific man of medicine.

Usually a rebellious patient is the easiest to cure. A man who is sick don't read the riot act often.

Nature suffers many impositions, but her wrath knows no bounds when fully aroused. Even death itself sometimes pays the penalty.

The sturdy druggist does not always wink his eye in the doctor's favor. The American dollar has too much silver in it.

Medicine without its expectations would be one dreary waste, but no man knows what time a green oasis may bob up.



In neuralgias of the heart give strychnine arsenate in moderate doses in the intervals. continued for months.

Amaurosis has subsided under the continuous administration of strychnine, any of the salts, in full dosage.



To be a successful practitioner, you must first learn to be a good mixer, i. e., mind, matter and money.

Ignorance is one of the most gracious things in all the medical world, for think of the millions who escape the awful penalty of a mistake and are none the wiser.

The Allopath and the Homœopath are at loggerheads over infinitesimal doses, and still both are naturally bound to be of a mercurial temperament.

A doctor in order to be popular must be unto all men all things. And why? A sincere conviction rightly and forcibly set forth will find some support in the end.

The heavy-laden "alcoholic" representative, like the "busting broncho," is rapidly disappearing. I am truly delighted the lay folk have at last acknowledged a doctor is as good sober as he is drunk.

Custom is a strange commodity. Let a doctor refer to his text-books in the presence of a patient and he is immediately denounced as fossilized; while a legal light is considered a smart Alec who fails to do this.

Always extend your tenderest sympathy to a delicate little, fever-racked frame. It helps to soothe away the glistening tear upon the ever moistened eyelid of the devoted mother, whose hopes hang upon every gesture.

Every man who complains of a filthy taste in his mouth is not always afflicted with some disease of the stomach or liver, but upon close examination somewhere on his person you may reveal to yourself some filthy lucre.

The best way for a doctor to succeed is to collect at most 75 per cent of his accounts.

Don't give advice too quickly. Remember deep water runs very slowly.

When a patient is ill he will promise you anything, and he will do the same thing when you have cured him.

Teach your patients to keep their words with you, but remember precept isn't worth a copper in this instance.

Do your part towards your patient, be he prince or pauper; your rewards come from hovels as well as palaces.

A doctor's life and a doctor's wife are two instances of perfect sacrifice.

Belfield, Va.

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## EPOCHS IN MEDICAL HISTORY.

By W. S. Stranahan.



THE threshold of the twentieth century is a point in history pregnant with valuable deductions in the history of medicine.

It is interesting to look back over the years, and note the gradual rise of medicine and surgery from the low level of superstition to a high plane of scientific achievement. The earliest writers on

medicine place its origin, in common with that of most branches of knowledge, with the Egyptians. They appear to be the first nation that cultivated medicine and furthered its progress. Many peculiar and medical attributes were believed to belong to the deities. All diseases were supposed to originate from the anger of Isis. Resin was burned in the morning, myrrh at noon, and a com-

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In atony of the stomach and bowels the administration of strychnine in moderate doses is highly effective and enduring.

Strychnine is indicated by pain in hypochondria, at umbilicus, in forehead, nausea, yellow or brown spots, sallow about mouth.

position termed cypha in the evening, in the Temple of Isis; and the sick were taken there to sleep, during which the oracles might reveal to them the means which they should employ to effect a cure. This is but one illustration of the superstition which prevailed at that time.

The earliest authentic records which we can ascertain from collateral reading are to be found in the Scriptures. Here it is stated that Joseph commanded his servants and physicians to embalm him (1750 B. C.). This fact shows that Egypt at that time possessed a set of men who practised the healing art and that they embalmed the dead.

Through the writings of Moses in the Scriptures we ascertain that the medicine of the Hebrews appertained mostly to public hygiene. Meat of the hog and rabbit was forbidden, as being injurious in the Egyptian and Indian climates. The relations of man and wife, and the purification of women, were regulated. The measures suggested by Moses for the prevention of leprosy have not yet been surpassed. Next to Moses, Solomon acquired an efficient knowledge of compounding medicines.

The Indian races were divided in castes, the priests alone enjoying the privilege of practising medicine. Their medical knowledge was condensed in a book which they called Vagadasastin. They believe the body gave rise to 100 species of gas, through 1,700 vessels, the gases conflicting and engendering diseases. So far as we know they were the first to record a way of testing the specific gravity of the urine. Though credited with many absurdities, they claimed to cure the bites of venomous serpents, and compounded an ointment which eradicated the cicatrices of smallpox, a

result which has not as yet been attained in the present epoch.

The Chinese attribute the invention of medicine to Hoam Ti, one of their emperors, but beyond the use of cups, fomentations, lotions, plasters, baths, etc., their knowledge did not extend till the missionaries introduced their medical knowledge.

The condition of medicine in Greece was at first rudimentary, but later Greek physicians are credited with the most brilliant discoveries. The most distinguished of Chiron's pupils was Æsculapius, who possibly occupies the most exalted place in the history of medicine. Æsculapius is always painted with a staff, because the sick have need of support, and the serpent entwined around it is the symbol of wisdom.

The first operation of venesection is attributed to Podalirius, of recognized Grecian skill, the patient being a princess. The early Greeks above all recognized the value of physical culture, and were the children of to-day compelled to follow such a routine of training, a rugged constitution would replace many a delicate one.

Hygeia, from whence comes hygiene, or the art of preserving health, was the pretended sister of Æsculapius. To Hippocrates we owe the classification of endemic, sporadic and epidemic forms of diseases, and their division into acute and chronic.

Under the Ptolemies dissection of the human body was allowed, and Herophilus deserves first mention as a dissector. He described the brain and its vessels, the eye, the intestinal canal and parts of the muscular system. Erasistratus and Aretæus also added greatly to the medical progress of that age. Of all the

The dose of strychnine nitrate may be gr. 1-40 to begin with, and pushed up until the muscles begin to twitch.

Aged people require as a rule far larger doses of strychnine than the young, and experience corresponding benefit.

physicians of antiquity, Galen was probably the most brilliant genius. In the midst of disorder he led back to the safer road of scientific observation, and wrote extensively on anatomy. He was the first vivisectionist.

After the sixth century medicine was exercised almost exclusively by the monks of the west, who were ignorant and superstitious.

During the thirteenth and fourteenth centuries medicine made remarkable progress in France under St. Louis. Medical universities were founded in Europe, medical instruction systematized. The progress of medicine in the nineteenth century was far more rigid, creditable and momentous than during any like period of the past. This is true

not only in our own country, but in all civilized countries of the globe. Antique superstition, idle theories, foolish speculations, absurd practices, have been largely eliminated. Medical institutions are upon the loftiest plane in their history and teachers are better endowed than ever before.

The proving of drugs, electricity, the microscope, anesthesia, antiseptics, physiological research, laboratory experiments and hospital opportunities, are enormous inspirations to skilled treatment and fresh research. One may not yet assert that medicine has arrived at the stage of an exact science, but it is surely approaching such a stage.

Chicago, Ill.

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# SCIATICA.

By E. F. Benner, M. D.



MEDICAL authorities say it is a form of neuritis with physiologic changes in the nerve sheath, with lesions near the sciatic notch or at the middle third of the thigh. The males are generally the worse cases to deal with, and nearly always with a history of former attacks of rheumatism. Overstrain, injuries, exposures to cold and wet, rectal diseases, improper positions or organs, pelvic growths or caries of bone are the predisposing causes.

The pain follows the course of the sciatic nerve, with marked tenderness, slight immobility of the muscle and at times atrophy. The pain may be merely a dull ache, or a very sharp stitch may be present at certain areas; and is generally worse upon the approach of stormy weather. The knee-jerk is absent on af-

fected side. Pain is severest about midnight.

These are the important symptoms, and none should fail to make the early diagnosis. However, coxalgia has at times made it rather difficult for some younger practitioners, but you will remember that the pain in coxalgia is more marked at the hip or knee-joint, or front of the thigh, while in sciatica the pain is at the posterior part, generally midway between joints. The tendo Achillis reflex is also abolished in sciatica; and the history, with the examination of the affected leg, will generally avail. Good features in favorable sciatica: The prognosis is generally favorable, but several prominent English physicians have had this dreaded disease for months, with most excruciating sufferings.

Much can be said on the treatment,

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The dose of strychnine being strictly for effect, the doctor must know exactly what effect to expect and give till he gets it.

If strychnine in doses of gr. 1-40 causes headache, be careful about its use and look to the kidney elimination.

and remedies may prove worthless. Rest is absolutely necessary. Then search for the cause and remove same. Blisters, hot poultices, ice, hypodermic injections of cold water, morphine, cocaine, or glycono-phosphate of soda, are valuable for pain. Electricity is highly recommended. Internally either of the following are useful: Sodium salicylate, salophen, nitroglycerin, potassium iodide, chloroform, colchicine, zinc phosphide, pilocarpine, massage, cimicifuga, rhus tox, and Tritica. The best in my judgment are saline cathartics and intestinal antiseptics at the onset of the disease, which with powdered chloral sprinkled upon previously warmed adhesive plaster and applied along the course of the nerve, have done excellent work for the pain during the last four months, in my territory; then searching for the direct cause I remove that, and I dare say I

have quick results and happy and congratulating patients.

Readers may laugh at this treatment, but prescribe for the patient a large dose of saline laxative, followed by intestinal antiseptics, then dilate the sphincter ani and try either rhus tox, zinc phosphide or nitroglycerin internally, with counter-irritation and hot camphor liniment externally; and never do nerve stretching unless by the surgical method, for we learn that it has done considerable harm. Hot air baths are highly recommended in connection with above treatment.

Let the results of queries 2916, 2936, 3049 and 3086 follow in print with a loud voice.

Wesselowski applies carbon bisulphide locally. How about it? It has proved worthless to me.

Richlandtown, Pa.

NEW STYLE TREATMENT FOR TYPHOID FEVER.

By J. W. Collins, M. D.

Read before the Eastern Ohio Medical Association.

BEING fully persuaded that almost if not every day some drug, known or even suspected of possessing antiseptic properties, has from time to time been vaunted as a certain cure for this disease, and being equally certain of the fact that the remedies that I am about to propose are widely known among the profession, this warns me to confine my remarks simply to the manner of their administration rather than to the newness of their application.

Taking for granted that the theory of modern observers is correct, that the disease owes its origin to the presence of certain germs in the intestines of the

patient, and that their rapid multiplication, together with the resulting increase of ptomaines, is the real cause of the disease, and that remedies to be effectual must wage a continuous and relentless warfare for the destruction of these invading parasites, it becomes a question of the choice of weapons with which to make the attack.

In the summer of '93 I was called some distance in the country to see what was supposed to be a case of "brain-fever," so-called by the friends. I found unmistakable evidence of typhoid fever; temp. 103.5 at 2 p. m.; tongue red, dry and somewhat cracked; great thirst, tenderness in right side of abdomen, and severe

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Salicylic acid is the quickest remedy to relieve the pains and subdue the fever of rheumatism, the acute form.

The more acute the suffering and the higher the fever in rheumatism, the more certain is the action of salicylic acid.

headache, constipated and slightly swollen. I was poorly provided with medicines, being for once without my favorite remedy to reduce temperature, which is aconitine; and fearing to exhibit any of the coal-tar derivatives I was almost in despair for some remedy to control the fever till my next visit, when my eye lighted upon a bottle of the so-called "tonsillitis tablets," which you will remember contain aconite, belladonna, bryonia and mercuric iodide. The smallness of the dose of aconite, together with my limited knowledge of the action of bryonia, caused me to hesitate for a time in my choice of the dose. Determining to be on the safe side, I directed them to give one tablet every hour. In the meantime liberal doses of calomel and soda to be followed by a saline were ordered, and if the bowels were not freely moved by morning to give large enemata of normal salt solution; at the same time urging them to bathe freely with water that would feel cool to the patient. Promising to return on the second day, I started home, wondering what would be the result of this to me strange treatment.

On the day appointed for my visit one of those tedious obstetric cases, that so often causes us to disappoint other anxious patients, prevented my return till the afternoon of the fourth day. Approaching the house with fears of a sound scolding from a not over sweet-tempered mother, judge my surprise when I found all pleasant and serene, and being saluted with that ever welcome news, "My boy is better." Pulse less frequent, temp. 100.5 at 4 p. m., skin relaxed, tongue moist and very little thirst, tympanites all gone and the lenticular rose-colored spots plainly visible over lower part of abdomen, head-

ache much less, and evidently a better state of affairs than I could reasonably expect. I was told that the calomel and saline laxative had promptly moved the bowels, and they had been acting about three or four times each day since. As they had no other medicine to give, they had, to use the mother's expression, "just fired them little yaller things into him every hour," since I had been there.

Riding home alone I had time to think and reflect. Here was a combination of drugs never intended by the manufacturer or the originator of the formula to be applied to the treatment of such a disease, or such a pathologic condition as I was trying to meet with the mixture, but the change in my patient was so great, the improvement so marked, I could not refrain from doing a little experimenting, by simply continuing the hourly doses of the little tablets.

I now began to investigate the properties of the other ingredients. I knew from long experience that aconite was the great enemy of fever of almost every type, by reason of its wonderful power to lower arterial tension and excite the sweat glands; belladonna to relieve pain, and bryonia a specific for congestion of the intestines, while the mercuric iodide kept up a continual rattle of musketry against the intruding microbes. It is needless to say I kept the patient directly on this line of treatment till convalescence was well established, on the eighteenth day after beginning treatment; and as far as I can obtain from history and appearance of various symptoms, that he was entering upon the second week of the disease at my first visit. Since that time I have never used any other line of treatment, and so long as



It is probable that salicylic acid acts in rheumatism as an intestinal antiseptic, as others also relieve this malady.

In acute rheumatism the good effects of the salicylates are better shown in the young, as their attacks are more acute.

my success continues to be as flattering as at present I shall resort to no other.

Since resuming regular practice in the fall of '98 I have treated sixty-eight cases, with a mortality of two. One, a boy of 7, contracted whooping-cough during the early stages of convalescence; and one young lady of 26, whose autopsy clearly demonstrated the cause of death to be due to "acute tuberculosis," and there is no doubt in my mind now but I made a mistake in my diagnosis, mistaking the fever of quick consumption for that of typhoid.

In conclusion I wish to call attention to some of the advantages in this style of treatment: In the first place there is no dry tongue after the first few days, rarely any tympanites, bowels move without additional physic in almost every case, never any exhaustive diarrhea, temperature easily controlled by sponge baths, period of disease rarely beyond twenty-two days, and convalescence prompt and rapid. These considerations, to which may be properly added the ease of administration and comparative cheapness of the remedy, highly recommends it to all classes, and especially where you furnish your own medicine. In addition to the tablets, which should be given in hourly doses to adults, and children in proportion to age, I give copper arsenite gr. 1-100 about every four hours. In a few days under this treatment you discover a remarkable change in the odor of the discharges from the bowels, by reason of an absence of the cadaverous smell so often met in this disease.

Now, while I consider the little tablets as the infantry arm of the service in this battle against germs, and look to it here as in all armies to do the hand-to-hand fighting, and to keep up a steady and

continuous line of fire upon the enemy, there are times when a battery must be wheeled into position, in the shape of a liberal dose of calomel, or the sudden cavalry dash of a saline cathartic, to clear the field and bring the enemy out of ambush, while the infantry, with bayonets fixed, rush to the final and triumphant routing of the enemy, driving him from the field or compelling an unconditional surrender.

There are cases, no doubt, where it will be necessary to add something to this line of treatment. If the patient does not sleep, or becomes violently delirious, or any other complication arises, the proper remedies must be administered without interrupting the regular lines I have attempted to describe.

Toronto, Ohio.

At Syracuse, N. Y., Dr. S. Watrous, formerly of Chicago, died from the effects of a dose of morphine supposed to have been taken with suicidal intent

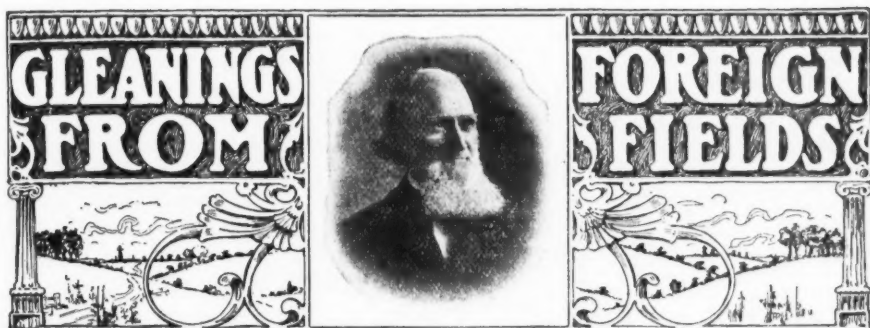
✽

The conference of German doctors, which was recently in session at Carlsbad, has announced the discovery of a new cure for scarlet fever, which has repeatedly proved successful. Dr. Moser, the assistant physician at St. Anne's hospital for children at Vienna, is the discoverer of the new serum. During the last two years he has tried it on 400 patients. The mortality was decreased to 8 or 9 per cent. The rate at the other hospitals was double this. The congress has been informed that the government will vote a considerable sum of money in order that the serum may be made in large quantities and distributed to all the children's hospitals in Vienna.

♥ ♥ ♥ ♥ ♥ ♥ ♥ ♥

In treating rheumatism always begin by emptying the alimentary canal thoroughly, and keep it always clean and aseptic,

In acute rheumatism give salicylic acid from gr. 1-6 to 1, every five minutes till the fever falls below 100 degrees.



Translated by E. M. Epstein, M. D.

ALBOFERRIN.

Alboferrin is recommended by Dr. W. Meitner in *Aerztl. Monatsch.* No. 11, 1901, as very absorbable and agreeable, and having no unpleasant effect upon stomach or bowels. In severe cases of deficient nutrition, and where other preparations had no good effect, the doctor had with this very gratifying results. The dose is 3 to 5 teaspoonfuls *pro die*, or three times a day in 4—5 tablets.—(*Wien. Med. Wochens.* No. 1, 1902, p. 46.)

YOHIMBINE.

A. Eulenberg (*Deutsche Medizinische Wochenschrift*, 22, 1902) treated recently many cases of neurasthenic impotence with subcutaneous injections of yohimbine successfully. He uses a 2 per cent solution. The formula is: *R.* Yohimbine 0.2, solve in aq. dest. sterilisat 10.0 *Detur ad vitr. fusca.* Signe 2 per cent yohimbine sol. for hypodermic injection, .5—1.0 *pro dosi.* He begins with injecting half a syringeful (0.01 yohimbine) of this solution and increases the dose if needed. The injections are made at first daily, and when effectual only after two or three days, and after twenty injections it is stopped for some time.—(*Therap. Mntshft.*, July, 1902.)

JUGULATION.

Alboferrin is recommended by Dr. W. Diseases, especially Typhus and Appendicitis, by a Rightly Understood Use of Calomel, Water, Heat and Quinine. (From a lecture by Dr. Riviere, of Paris, given at the British Medical Association's annual meeting at Cheltenham, 1901).

Riviere advocates strongly the energetic use of cathartics, especially calomel and castor oil, in infectious diseases of the intestinal canal, especially typhus, dysentery and appendicitis. This is intended not only to disinfect the contents of the intestine and free it of toxins, but above all to stimulate the functions of the liver. For since the task of the liver is to purify the juices that originate in the intestines, and which flow together in the portal blood, and to disinfect them, and also to remove impure juices and toxins from the organism, therefore is every disturbance of the hepatic functions the most important consideration in every infection and intoxication.

From the above stated principles Riviere elaborated a *sui generis* method of treating appendicitis. First of all he rejected the usual method of treating with ice and opium, because by it the peristal-

sis of the *ductus choledochus* is paralyzed, the excretion of bile is hindered, and the formation and absorption of toxins and the infection of the appendix promoted. The patient first gets a warm bath of 36 to 37 degrees C. (= 96.8 to 98.6 degrees F.), is then put in a warm bed, on his abdomen is rubbed an ointment of mercury and belladonna, and hot poultices applied to it. Pains are controlled with antipyrin 2.0 (= gr. 30) and five drops of opium tincture. An hour later an enema is given of *Decoctum Althææ*, and immediately after this hot water, or barley water, is given him to drink abundantly. Apart from these the intestinal evacuations are promoted with calomel and sodium bicarbonate, aa, and castor oil suspended in hot water.

The cathartics as well as the enemata must be repeated for several days according to circumstances. In case of threatened perforation Riviere succeeded in getting a slight evacuation of putrid masses by means of the following pills:

Hydrargyri chloridi,

Rad ipecacuanhæ aa 0.2 (= gr. 3),

Extracti opii 0.03 (= gr. 1/2),

made into eight pills. S. One every hour.

With this treatment, which has proved itself reliable for fifteen years, and rightly, considering its theoretical foundations, Riviere maintains it is always possible to cure appendicitis as long as no pus has yet been formed.—(*Therapeut. Monatsch.* Jan. 1902, p. 43.)

AGAINST OBESITY.

Against Obesity: Three teaspoonfuls of fresh yeast every day.—(*Ibid.* April 2, '02.)

In adults' acute rheumatism salicylic acid may be given in doses of gr. 2 every quarter-hour till the pain subsides.

Against Chilblains: *Eau Oxygene* (peroxid of hydrogen).—(*Ibid.*)

Ointment Against Chalazion: R. Iodi puri 0.2, kali iod. 0.6, lanolini 4.0, vaselini, aq. dest. aa 0.8. M. ft. ung. S. Apply of it to the chalazion on going to bed.—(*Therapeut. Monatsch.* April, '02, p. 222.)

INSOMNIA OF CHILDREN.

Dr. L. Fuerst (*Deutsch. Med. Ztg.* No. 9, 1901), used in the sleeplessness of children starch enemata with Dormiol, from 0.5 to 0.10 (= gr. 3/4 to gr. 1 1/2). In two cases the *pavor nocturnus*, (children's night-terror) disappeared after such enemata were used for 10 to 14 days. One case of chorea minor was improved, which is explained by the improved sleep.—(*Ibid.*)

OPIUM NARCOSIS IN AN INFANT OF SEVEN WEEKS.

Dr. N. Feuerstein reports from his private practice the following instructive case: To an infant of seven weeks a teaspoonful of opium tincture was given by mistake for rhubarb syrup, at 6 o'clock a. m. Owing to the ill advice of an old woman the danger was not discovered till three hours later. The doctor found the infant strongly cyanotic in face and all over the body, head drawn strongly backwards and held there, eyes protruding, the upper eyelids leaving the lower part of the sclerotica uncovered, arms stretched in the elbow joint and projected forward, fingers balled into fists as in spasm, myosis of high grade, continual twitching of the mouth as in the act of suckling, pulse hardly perceptible, res-

It is always better to give the salicylates in very small doses very frequently repeated, and avoid nauseating.

piration shallow, and every inspiration accompanied with a crowing sound, reflexes abolished, touching the eyeball resolved itself not in a closing of the eyelids.

There was evidently no time to lose. The stomach pump was at once used, by means of a soft catheter introduced into the stomach through the right nostril, which brought out curdled milk brownly tinged and with the characteristic opium odor. Then the doctor injected lukewarm water and after that a weak solution of permanganate of potash repeatedly till the solution came out clear. The infant's condition did, however, not improve. Not until a warm bath with following cold ablution was given, came the infant to consciousness, and then cried out at every ablution. Then some high intestinal enemata were given with the same permanganate solution, which brought away some abundant fecal discharges. The mother's breast given the infant it would not take. A few teaspoonfuls of black coffee with a little wine were then given, and the infant put to bed, where it fell immediately into a slumber. Pulse and respiration had improved, myosis as before, twitching of the mouth the same.

The above procedures were repeated several times during the day. In the evening the doctor found the following state of things: Neck stiffness, glottis spasm and cyanosis all gone. Pupils still contracted, but reacting, though feebly, on direct light. Pulse and respiration satisfactory. Somnolence continues, but the infant can be roused by external irritants. The breast is taken spontaneously. The night passed eventlessly. The next morning the child was perfectly well, excepting a slight depres-

sion and some evidences of a slight gastrointestinal catarrh.

This case teaches:

1. Leave no narcotic remedies in the nursery.
2. Receive very cautiously statements from nurses or old nursing women.
3. In similar cases do not lose precious time with emetics, but proceed at once with the stomach pump.—(*Ibid.* No. 5, pp. 220-1.)

LUBRICANT FOR CATHETERS.

Aseptic fatless lubricant for catheters: Corrosive sublimate 2 centigrams, water 25 grams, soap powder 50 grams, glycerin 25 grams.—(*La Rev. Med.*, Feb. 5, '02.)

ASPIRIN (ACETYL-SALICYLIC ACID).

Following are the results of the exact experiments made with the above remedy by Dr. Gazert at the proposal of von Ziemssen. The doctor used it wherever salicyl is of benefit, i. e., as a specific in articular rheumatism, as an antineuralgic and antalgic, as an antipyretic and diuretic. For lack of proper cases he was unable to try it as an aseptic, nor in skin and eye diseases. In all he observed 74 cases, 25 of which were of genuine *polyarthritis rheumatica*. The results of his observations are as follows:

Aspirin has all the resorptive, hence all the favorable, therapeutic effects that salicyl has, but the latter remedy has the decided advantage of a pleasanter taste and less unpleasant influence upon the gastric mucosa. The active substance of aspirin is the split-off salicylic acid, and this split-off takes place in the intestine,

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The constant instillation of very small doses in rheumatism meets the constant production of toxic matter in the stomach.

By giving salicylic acid in very small but frequent doses we avoid the distressing tinnitus caused by over-doses.

and in the organism very likely but very little, at all events it takes place very rapidly, so that aspirin has no specific effect, e. g., to act favorably on the heart's action.

These observations do not agree with the more favorable notices from the authors on aspirin, but they are necessary to prevent disappointment.—(*Ibid.* p. 45.)

EYE INJURY FROM LIME.

FIRST AID.

The best first aid to be given in an accident of this kind is certainly abundance of clean water to flush out the eye thoroughly. But Prof. Hoppe rightly calls attention to the fact that the eyelids in such an accident close spasmodically together so that but little water reaches into the conjunctival sac. And, moreover, when not sufficient water reaches the sac to wash away the lime, then the little water will only dissolve the lime masses the better and aggravate the case. Prof. H. recommends, therefore, to flush out the conjunctival sac with a ropy, soft lanolin ointment combined with 2 per cent holocain. This ointment is kept on hand by workmen in a prepared gelatin tube with a thin, smooth neck, which is inserted between the lids and the tube compressed, and the sac filled with the ointment. The accident with lime to the eye is frequent among laborers with that material, and they should provide themselves with this remedy.—(*Wiener Med. Wochensch.* No. 38, 1902, p. 1810.)

The above is an excellent suggestion. The holocain will overcome the spasm, the ointment will enwrap the lime parti-

cles and render them harmless, and the eye can then be flushed out and prevent any further trouble. I have not seen any gelatin tubes made like that described above, and it seems to me such a tube had better be made of the usual collapsible kind, furnished with a thin nozzle and a cap screwed over it.—(Dr. E.)

CANCER.

Cancer seems to be on the increase, and the study of it keeps pace with this. The latest, up to May 1902, is that contributed from the Botanical Institute of the Agricultural High School in Berlin, by Dr. Feinberg, to the doctrine about the tissue and cause of cancer tumors. According to this authority it is concluded that—

1st. Organisms were found within cancer tissue, which can be distinctly differentiated, by means of staining and structure, as independent, monocellular, animal organisms from all cells of the body, and from nuclei and nucleal figures contained within cells.

2nd. It is to be assumed that these organisms stand in causal connection with the cancer tumors.

3rd. It is to be assumed that these organisms, which are characterized by their staining and structure, represent an encysted state, and that in their origin and development they possess a form somewhat different, but analogous to these.

4th. In doubtful cases of diagnosis, the finding of these organisms in the tumor will decide for cancer.—(*Ibid.* p. 258.)

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Don't be afraid you will not get enough salicylic into your rheumatics when you give only gr. 1-6 at each dose. Try it.

Salicylic acid is better than sodium salicylate in the treatment of acute inflammatory rheumatism, in smaller dose.

Miscellaneous Articles

INTESTINAL DISEASES.

Dr. Peter, page 881, strikes me as a little old in his treatment of intestinal diseases.

Case 1. Boy, 12, son of physician, previous treatment morphine to lock bowels and podophyllin to unlock bowels. I stopped morphine and podophyllin, and suggested saline cathartic or castor oil with a few drops of turpentine once a day, followed by enemas of water in one to two hours; first quieting patient with codeine and hyoscyamine before using injections, using one to one and a half gallons of water in a fountain syringe, after having adjusted a No. 16 E catheter to the nozzle. Anoint the catheter with lard or vaselin, allow water to run from catheter until it is warm (for standing in the tube it will become cold and cause the bowels to rebel, giving the patient much pain); hang the syringe so that water will be about one foot or more above the bowel of the patient. Hold in with a cloth pressed either side of the anus, stop the flow until the desire to stool passes, then continue the flow as much as the patient can stand. The best position for the patient is the knee-chest, with a well-fitting

though not tight abdominal supporter. The water will pass through the ileocecal valve, and in this position by gravitation, seeds and other causes of appendicitis will flow into the ileum and pass out with the slush. Of foods, liquids only that are entirely digested in the stomach, with digestants, should be given every two to three hours, with strychnine arsenate gr. 1-134, A. A. Co., as is necessary to prop the heart from the beginning until after the patient is up and around. If fever is over 100, use Defervescents, or if the patient is very weak, the Triad, one or two granules as indicated. Paint over the area of most pain with iodine to blistering, or use turpentine, or both. If the pain and fever are increased by food in the stomach, or emesis bothers, wash out the bowel, wait half an hour, then equip the syringe with a catheter, and introduce the food into the colon; a cup of fresh milk with an egg beaten in, or extract of beef, warm, with a teaspoonful of Peptenzyme immediately before allowing it to flow into the bowel. Hold a cloth on each side of the anus for half an hour or more, until the patient has got quiet. Always

have the patient lying on the left side while taking a nutrient enema. Repeat three times a day, always preceding by flushing the bowel.

For anorexia I give a few drops of nitromuriatic acid in water before eating. My old standby is calomel as a starter, gr. 1-10 every half hour for ten to twenty doses, followed in six to eight hours by Saline Laxative, or castor oil and a few drops of turpentine. Then my reliable friends in need, the W-A Intestinal Antiseptics, 1 to 3 tablets every two to six hours; sometimes alternated with copper arsenite gr. 1-100.

The boy was placed in bed, knee-chest position; pain to right and below umbilicus, where a stump the shape of two fingers could be felt.

Under the above treatment he was well in ten days.

Case 2. Mrs. S. P., 37, had been at picnics or eating stuffing, popcorn, etc.; abdomen next day distended, bloated, pain in right iliac fossa, constipation, fever. Gave calomel gr. 1 in 1-10 gr. doses every half hour, followed next morning by enema of warm water. I realized for my labors, scybala, popcorn, seeds, etc., and, by the way, some grape seeds, but she had not eaten any grapes for months. Then gave W-A Intestinal Antiseptics, Saline Laxative, and strychnine arsenate gr. 1-134 every three hours; and as the liver and kidneys were deficient, gave apocynin gr. 1-12, one to four granules every two hours. Soups, milk, buttermilk and fruit juices, every three hours. Abdominal supporter. Painted most painful spot with iodine and turpentine alternately. Injections, knee-chest position. On the tenth day a pseudo cast resembling a kid glove finger, though longer, squeezed together

and wrinkled, surrounded by pus, came with enema. What was it? Patient says she feels better than before taken sick, though only a week in bed.

Case 3. Boy, 14, sick one week, anorexia, frontal headache, constipated, tired feeling, ache in small of back, cough, lung sore, fever 103 in afternoon, pain in right of umbilicus, swollen, tympanitic, bowel discharges yellow, scarcely any feeling in early morning, busy when asleep with hands and talking, later nose-bleed.

Diagnosis: Typhoid fever. Gave calomel gr. 1-10 for three doses, Saline Laxative in the morning, then W-A Intestinal Antiseptic tablets, one or two every two hours through the day, hyoscine hydrobromate gr. 1-1000 at bedtime, Saline Laxative 5 a. m., enema at 8 a. m.; food every two or three hours; nitromuriatic acid a few drops in water before eating; milk, soup, buttermilk, fruit-juices; lard, camphor, spirits turpentine and coal oil over abdomen and lungs morning and night; broth three or four times a day; vinegar fumes for lungs until they were well, then ceased. Twelfth day, after several days of passing mucus, indicating considerable lesion, I was rewarded by as many ulcers as a teacupful. The boy says when they tore loose he had a "geminy fit," awful cutting pain (these parts looked like oysters, largest as large as end of thumb). This came with the enema that followed the Saline Laxative in the morning, and near bedtime, which he said relieved the bloat. He never had headache after I began treatment. For fever I used defervescents, and for pain Acetanilid Compound.

I have been getting such benefits from

All stomachs are not alike: Some take salicin, or a salicylate, or salophen or salol better than the acid.

To every patient the personal equation must be applied. Man is in many respects similar, but never quite identical.

each visit of the twins that I write this mixedly.

I have been a constant reader of the CLINIC since '95. Your "foot lights" are terse, short, and filled with richest kernels and sweetmeats.

Case 4. Mrs. Dr. T., face and eyes congested, sneezing, two handkerchiefs filled from eyes and nose, aching all over. One Coryza granule, one hour before and one at bedtime. Next morning: "Why, doctor, it is magical and wonderful how those little fellows act. I am well."

S. P. STOWERS, M. D.

Appleton, Mo.

DIET.

What a man eats is of more importance than anything else he does. The ancients were all vegetarians. Diodorus Siculus says that the first men roamed over the fields and woodlands like the beasts of the fields, in search of roots and herbs. An ancient writer affirms that the diet of the primeval race differed according to the production of their respective countries, the Arcadians having lived on acorns, the Argives on pears, the Athenians on figs, etc.

Plutarch relates that the Argives, led by Inachus, searched the woods for wild pears to support them.

Pliny laments the savage condition of the first ages, "which subsisted on acorns."

Galen says the acorn affords as good nourishment as grain. The Arcadians continue to eat them.

Herodotus relates that upon the death of Lycurgus the Lacedæmonians, meditating the conquest of Arcadia, were told by the oracle that there were among

them the best acorn eaters, who would repel them in case they attempted to carry their arms with them, as afterwards did happen.

At length agriculture, doubtless in the rudest form, began. Hesiod ascribes the invention of agriculture to Ceres, and admonishes the husbandman to pray to Jupiter and to her before he enters upon his labors.

Pliny attributes still further the invention of the plow, grinding of corn and making of bread to Ceres. Divine honors were paid to her in Attica, Italy and Sicily on this account.

No animal food was partaken of up to the time of Noah; then came disaster, licentious living and a world of trouble to mankind, who before was as innocent as the angels.

They say that knowledge makes for progress and progress makes for happiness. I doubt very much that knowledge makes for a greater happiness. Eating of animal food may make the world more nervous, thus apparently more energetic.

Now, in writing on this subject of eating, I am aware that I am treading in an old path. This subject has received greater attention from more learned men than any other. And people go right on eating their ham and bacon, porterhouse steak, as before. Yet as a hen that would gather her chickens would I say my say, and gather poor, lost, drunken humanity into the fold that leads up to righteousness and clean living.

You will not let your mind run on sexual intercourse as the ultimate and only thing in life, if you call a halt on beefsteak and go back to man's natural food. There would be no talk of a beef-trust. There would be no more divorces,



Salicin has been recommended for that form of malaria characterized by rheumatoid pains, and distinct periodicity.

Salicin for free mucous discharges, with septic tendency, foul tongue, fetid discharges. Dose gr. 1-6 to 1, every five minutes.

no saloons, no work for temperance agitators, did people eat right. Epilepsy comes from the eating of animal food, and the nations of the earth who indulge are fast becoming neurotics. I am writing this with a plate heaped up full of peaches and pears, and I can't imagine for a moment that I could out and murder a pig or an ox and accept them as a substitute.

We have seen that the ancients lived on roots and herbs, and from what has come down to us from the musty traditions of the past, in his physical make-up man was almost perfect; and there is a sect known as Bible Christians, numbering 125 souls, who have abstained from animal food, as their ancestors did before them, and their average is 61 years. There is not, nor has there ever been, an epileptic among them.

This is some tangible proof that at least longevity is induced by the vegetarian habit. I don't wish to preach or be termed a crank, yet I have the facts from experience that a vegetable and fruit diet makes far better men and women, and I would advise all those friends who believe that the gratification of the sexual appetite is the grand climax of life, and the only thing to live for and think about, to take up a diet of onions, not forgetting the sitz bath, and they will rejoice in the birth of offspring rather than to seek preventives. "Oh, I don't want another baby, doctor. Can't you help me?" "Yes, indeed." How familiar is this wail.

Now, if they would only consider the vegetable diet, they would comprehend the fact that they were not created just for the gratification of man's desires. Woman was created to bring forth children, and she cannot bring forth too

many, if she would only resort to the vegetable and fruit diet. These kind of children would greatly improve the world, and every child would become a blessing; and a man and woman would at least come to the realization of the fact that they are the agents of the Almighty and this subject would receive the serious attention that it deserves. We were not placed here to eat and drink and sleep, and then eat and drink and sleep again only, but to bring grand souls into existence. That the Edisons and Newtons who are wishing and hoping to be born may be born well, and a help to carry on the great plan of God for mankind. Give us more sunshine and less of the shadow. Let the oncoming baby be welcomed with great joy not dreamed before it is born. Glve us more babies and less meat.

H. S. BREWER M. D.

Chicago, Ill.

ANTISEPSIS.

I desire to say a word in favor of the W-A Intestinal Antiseptic in typhoid conditions, also in flatulent dyspepsia and in the intestinal catarrhs of infancy. When using the combination for adults I dissolve a tablet in half a teacupful of hot water and add a little essence of peppermint or wintergreen, according to the wishes of the patient. In the case of children I dissolve a proper amount in cool water that has been previously boiled, then flavor to taste.

I find that nearly all, if not all, cases of illness progress more favorably if intestinal antiseptics be attained. Flushing of the colon with warm solutions of sulphocarbolates or common salt materially assists in bringing about the best results.

Salicylic acid promptly arrests gastric fermentation, stopping heartburn, waterbrash and the acidity always present.

Salicylic acid has proved a useful remedy in phlebitis, checking the formation of toxic acids that cause it.

In flatulent dyspepsia I administer the W-A Intestinal Antiseptic in solution one-half hour before meals and at bedtime, while in typhoid I use a tablet every two or three hours until the stools show the action of the combination, when the intervals are lengthened and the dose lessened.

I use the treatment well into convalescence. This treatment materially lessens diarrhea and tympanites as well as exercises a beneficial effect upon the temperature.

In the early stages of typhoid I find baptisin very beneficial; in fact, I have a sort of routine treatment of baptisin, sulphocarbolates, cool sponging, and boric acid solution as a mouth wash. Of course I do not forget the use of strychnine arsenate, which I believe is the best form in which strychnine can be administered, but I do not use it early unless great depression supervenes.

This treatment, with proper nourishment, suffices in a great majority of cases, while in others indications call for the use of other medicines as well. In another letter I propose to give my views on the diet of typhoid.

HORACE R. POWELL, M. D.

Poughkeepsie, N. Y.



BRIGHT'S DISEASE.

The following notes were taken at the Medico-Chirurgical College while a student:

Definition: An acute inflammatory disease of the kidney, affecting a whole or a part of its substance.

Etiology: Males are generally affected. Exposure to cold or extreme wet weather (affecting frequently mail carriers, drivers, physicians, heavy drink-

ers). Infectious fevers, toxic agents passing through the nutritive artery, irritants (which accumulate in the substance), pregnancy, chronic skin diseases, excessive burns.

Pathology: General appearance of kidney is soft, large; capsule not adherent. First stage it shows hyperemic patches, which fade later into lighter areas.

Symptoms: Increased arterial tension, nosebleed or headache, chilliness, nausea, vomiting, facial dropsy, anemia, fever (slight), swollen ankles, backache, uremic symptoms, losing weight, temporary aphasia, very early symptoms are noticed to be of a cerebral nature.

Urine: Amount diminished, may be only four to six ounces per day, smoky appearance, upon standing throws down a sooty-like sediment, specific gravity 10.25, corresponds to the blood and albumin test, microscopically epithelial tube casts are seen, diminished amount of urea, reaction of urine is acid.

Pulse: Generally hard, at times slow, but may shortly be accelerated. Aortic second sound is accentuated.

Diagnosis: To be based upon the examination of urine, pallor of face, puffy eyelids, prostration, muscular twitching at times, albumin, tube casts, presence of red and white corpuscles.

Treatment: Diaphoretics and saline cathartics are largely indicated. Rest very essential, room warm and ventilated, milk diet, carbonated water, lemonade, dry or wet cups recommended. Relieve the congested kidney by hot pack baths, or venesection if dropsy does not yield to the cathartics.

Nausea: Give cracked ice, cocaine or bismuth subgallate.

Cardiac Depression: Infusion digitalis, acetate of potash.



Salicylic acid promptly relieves some common forms of headache, especially those due to uricemia or sour stomach.

Salicylic acid has been recommended as a remedy for gall-stones. It combats the gastro-duodenal mycosis causing it.

Convalescence: Basham's mixture, other remedies very valuable are apocynin, cannabin, chimaphyllin, convallamarin, hydrastine, iodoform, strophanthin, veratrine, saline laxative.

Prof. J. V. Shoemaker claims that diet is very important, and bear in mind the statement of Prof. G. Johnson that "renal degeneration is a consequence of long-continued elimination of products of faulty digestion through the kidneys."

Other esteemed and honored teachers lay great stress upon inactivity of the liver, which does not respond to the digestion of the albuminoid substances. Therefore, restrict the use of lean meats and spices. Avoid Alderney milk, since expert creamery operators prove it too rich in fat. Avoid alcohol, cream, fats and butter, and recommend the use of stale bread, cheese, crackers, gruel, vegetables and broths. Caution patient as to the free indulgence at table.

E. F. BENNER, M. D.

Richlandtown, Pa.

*** DIAGNOSIS.

I don't believe the average practitioner makes his examinations in the proper painstaking critical manner, but often concludes from first impressions made, and proceeds to treat the case accordingly. For instance, in the malarial belt or section, one is called to the bedside, or the patient calls at the office. The doctor is prone to conclude (after making a careless examination, by putting his routine of questions, and rather bending and warping the symptoms to verify his conclusions by asking some leading questions), that he has a case of malaria; or as the case may be, may conclude he has pneumonia.

Conducting the examination as above described, these ruts are easily fallen into, because a proper and painstaking examination takes hard work and constant guarding against the patient misleading you by too much mouth. Of course they have always formed an opinion, and expressed several of the same, and try their best to make you think as they do, so one has to guard them and themselves against being led into erroneous conclusions by the patient, and the inclination to make the case equal the first impression made.

I believe all pill-peddlers will agree with me, that making a diagnosis is about eight-tenths of the doctor's work. It's easy to give the proper treatment after diagnoses are made.

A good way to avoid these mistakes is to begin at the first of your examination to fight these above-mentioned inclinations, by trying to make something else of the case, or to destroy or break down the first impressions, unless all possible evidence of its correctness is present. If, regardless of all this effort, you are forced to confirm your early and first conclusion, you are most sure to be correct, and the careful examination would in many cases improve wonderfully on the results of treatment.

D. A. MOHLER, M. D.

Crawfordsville, Ark.

ALKALOIDS IN INFANT PRACTICE.

As time passes I appreciate more fully the benefits of alkaloidal medication, especially among infants and children. In cases of threatened bronchitis the use of Dosimetric Trinity, apomorphine and calomel, with aromatics, will usually change conditions so that at the second



Salicylic acid has been pronounced a specific for tonsillitis. Here again it acts as a local antimycotic, and strongly.

In the numerous cases where mycosis of the throat precedes rheumatism or other maladies give salicylic acid with confidence.

visit the use of smaller doses of apomorphine is all that is necessary.

If the cough is dry, I add emetin; but I find that apomorphine is the remedy that can be given with great benefit up to convalescence.

In prescribing for the very young I usually add saccharin, and when apomorphine is used I always tell the nurse or parents that the solution will turn green.

Of course I always leave definite instructions relative to diet, bathing and ventilation. One of the greatest difficulties that I experience, especially when treating children, is to obtain proper ventilation. Parents do not discriminate between draughts and fresh air.

If results are obtained, medicines must be administered "with brains." With alkaloids the practitioner can "go fishing" with a reasonable expectation of landing his game.

HORACE R. POWELL, M. D.

Poughkeepsie, N. Y.

—:o:—

The vast improvement in taste alone, to say nothing of the other advantages, makes the alkaloidal granule a welcome visitor in the home where children are ailing. I am sorry for the doctor who does not look on this as of importance.

—ED.

CONDITIONS UNDERLYING DISEASE.

A few thoughts on the causes that lead to the troubles with which a doctor has to contend:

First, we have the germ, a single cell, invisible without the aid of a microscope, and having all the characteristics in its growth and development of the plants and animals we see around us, in-

creasing in size and numbers by a peculiar chemical process, mysterious and minutely exact at all times.

Of these germs we have an indefinite number, each in its peculiar way giving off a product, some of which are toxic and produce certain characteristic results. The culture or growth is situated in some part of the human body, the same as any poisonous substance taken into the system, each form repeating itself with the same characteristic symptoms, as in a well-marked case of diphtheria. If there be a mixed infection, there is a masking of symptoms.

The human body is made up of a combination of single cells, each having its own place, and its own work to perform. Each cell has its own cycle, the same as the germ or single cell. Each class of cells has its own peculiar work to do—some to govern, others to obtain and give nutrition to the whole system, and others to dispose of the dead and waste matter. Anything that stimulates one class of cells either forces it to do an extra amount of work, or through inhibition of the governing cells prevents it doing its share of work. In either case we have a clogging up of the system by an oversupply of things needed for the work to go on, or a toxic product of cell metabolism; either of which shows itself in various pathological ways.

Right here, let me suggest, possibly the cause of some of the various forms of tumors may be found. The inhibitory cells not acting, we have a proliferation of cell growth, due to the increased stimulation given to any class or set of cells, and they develop a mass of abnormal cell structure.

Reasoning along these lines, the treatment would be suggested as follows:

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Many a serious illness begins with sore throat, and could be stopped in incipency by the use of salicylic acid.

The tonsils are an open door for many infections. Salicylic acid forms a most efficient fly-screen if well adjusted.







and send it to the laboratory. I do not remember injecting but twice when it did not prove to be diphtheria.

I would like to say with the rest that I like the CLINIC the more the longer I take it.

GEO. T. MOSTON, M. D.  
Albany, N. Y.

—:O:—

We have not a word to say against the use of antitoxin. The only thing that might modify the favorable accounts given of its action is, that by using it so early many cases will go into the lists as saved that would, without it, have been of the mild variety that gets well without any treatment at all.—ED.

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#### DIABETES.

Dec. 1, 1901, Mrs. L. S. consulted me. She is about 60 years of age. Her urine contained a large amount of sugar.

I gave her digitalin, strychnine arsenate, iodoform; and four weeks later the "Diabetes" granule, which contains strychnine arsenate gr. 1-134, iron arsenate gr. 1-67, lithium benzoate gr. 1-3, quassin gr. 1-67.

This treatment she continued till the last supply of diabetes granules I sent her stuck together in a mass; but I directed her to dissolve them in water and continue. Last week I examined another specimen of her urine and found not a trace of sugar in it.

CHAS. A. WARNER, M. D.  
Warsaw, Ill.

—:O:—

This "diabetes" granule was a French idea, and was introduced in America to meet a demand from the physicians of Canada. We have said nothing about

it, simply because we knew nothing to say; and so preferred to leave it to those who tried it to tell us what value it possessed. This is the first report that has as yet come in. We trust that others will report, that we may estimate it at its true value. If it is as good as the French seem to think, we need it; if it is useless, we will drop it.—ED.

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#### APPENDICITIS—THE HYOSCYAMINE TREATMENT.

June 25 was called to see a German boy, 7 years old, a rugged little fellow, never sick before. This was the fourth day of sickness. Found him with temperature 102.5, pulse 120, face pinched and anxious, sharp pain in iliac region, with considerable tenderness over whole abdomen and much tympanites; bowels constipated.

I ordered turpentine and hot-water applications over bowels, colonic flushings, and Saline Laxative (Abbott's) until bowels moved freely; starvation diet. "Trinities" (Shaller's rule) for fever, etc.

June 26. Fever 101, pulse 110, bowels opened freely, but pain and tympanites increasing. Treatment continued.

June 27. No change in symptoms or treatment, except emetin was added and dose of "Trinity" slightly increased.

27th. No change.

28th. Tenderness increased and very bad tympanites. Fever and pulse about the same.

I now put him upon aconitine, hyoscyamine and strychnine arsenate.

29th. Soreness somewhat relieved, other symptoms the same.

30th. A marked relief in tenderness, temperature 100, pulse 100.

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As a preventive of measles, mumps and whooping-cough, give the little ones a granule of salicylic acid every hour.

Oh, why should the spirit of mortal be proud? Because he has found that salicylic acid cures his dyspepsia.

July 1. Vomited a green, frothy mass, and I added Intestinal Antiseptic eight 5-gr. tablets in twenty-four hours; other treatment continued.

That night he slept soundly from 9 p. m. until 5 a. m., and his mother thought "him gone dead, he so quiet." He made a steady uninterrupted gain on this treatment, with nuclein, until July 7, he was dismissed.

Hyoscyamine seemed to be the remedy that turned the scales.

W. R. MARRIETT, M. D.

Capron, Ill.

—:o:—

The efficiency of hyoscyamine to abort the majority of cases of appendicitis, when coupled with proper adjunct treatment, and before necrosis has set in, has been many times pointed out in the CLINIC by Zophar Case and others; and we are glad of this confirmation by Dr. Marriett, who is well known to your editor to be a close and careful observer. Are there not others with a word to say?—Ed.

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### PNEUMONIA.

My treatment of pneumonia has been very successful and has varied but little in over forty years. Secure abundant ventilation that cannot be shut off. Three or four doses of calomel gr. j—ij each, a saline aperient, mustard to chest, fly-blister if solidified, Norwood's tincture gtt. 64, syr. squill comp. 2 oz.

I hold to this until the pulse reaches normal, then p. r. n. For persistent and distressing cough I used Dover's powder at night, but now prefer some coal-tar derivative, with ipecac. I try to maintain a healthy but somewhat severe per-

spiration. Later I use ammonium muriate as the sputa become purulent.

I always make my own syrup of squill, by the old process of long continued infusion; percolation doesn't do.

A. G. CHASE, M. D.

Millwood, Kan.

—:o:—

Your treatment is the sedative, and not a bad one for robust cases; but it would be better if you recognized this fact and substituted definite and accurate agents for those now employed.—Ed.

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### DISPENSING.

Country physicians, especially those in sparsely settled districts, are obliged to furnish the medicines they prescribe. It is the custom, and the patients think they pay for the medicine only. And it would consume too much time to send to a drug store to have a prescription filled. Besides, country stores are often just out of, or never had in stock, the remedy wanted. It is very expensive to a poorly paid physician to furnish a great variety of remedies; and very unhandy to carry them over rough roads, unless they are alkaloids.

The materia medica is overburdened with useless remedies. No one physician can in a lifetime practice obtain a thorough experienced knowledge of all useful remedies, and it is better to rely on a few well selected ones that have been proved by actual trial to be of value than to experiment with things you know little about. And knowing, you will not have time and opportunity to use.

A thorough experienced knowledge of a few well selected agents is of far more

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The general use of the soluble salicylates has led to the neglect of the far more efficient salicylic acid.

A full purplish or lead colored tongue, local redness with slight purple, worse if pressed upon, indicate salicylic acid.

value in making a success of curing disease than a text-book knowledge of a vast number.

If I were limited to seven remedies, I would select *lobelia inflata*, *capsicum annuum*, *myrica cerifera*, *euonymus atropurpurea*, *sabbatia angularis*, *myrrh*, and *cypripedium pubescens*. I believe they will cover a wider range in curing diseases than any other selection of the same number. They are not dangerous, and if the instructions are not closely followed, as is often the case in country practice, where trained nurses are unknown and neighbors are often careless and ignorant, but volunteer to care for the sick, there is not likely to be any serious trouble from their misuse. These drugs are cheap, and can be given by mouth, skin, or rectum, alone, combined, or alternated.

*Lobelia* is antispasmodic, sedative, diaphoretic, expectorant, relaxant, emetic, and in some conditions cathartic. It is not indicated in relaxed conditions and when the pulse is small and frequent.

*Capsicum* is a pure and powerful stimulant, and increases the circulation in the arteries. It is not indicated when the pulse is full and strong.

*Myrica* is stimulant, astringent, diuretic, alterative and antispasmodic. It is not indicated when the stomach is irritated.

*Euonymus* is tonic, laxative, alterative, diuretic, cholagog, and expectorant.

*Sabbatia* is an appetizer and nerve tonic; a valuable remedy in all stages of all malarial diseases. In all old run-down cases, if you don't know what to give, and want to give something, try *sabbatia*.

*Myrrh* is a powerful antiseptic, internally and externally, and is indicated in

all conditions where such a remedy is needed. Combined with a small portion of *capsicum* it makes a powerful stimulant. Doses of 15 drops of the tincture can be safely prescribed for pregnant women.

*Cypripedium* is tonic, stimulant, diaphoretic, antispasmodic, and anodyne. It is indicated in almost all forms of nervous irritability or undue excitement, but not when the pupils are dilated.

J. A. BURNETT, M. D.

Calumet, Okla.

—:o:—

Well, I don't see why anyone should limit himself to seven or seventy remedies, so we need not discuss that part of the foregoing. But I must object to the whole principle of limitation Dr. Burnett advocates. For every diseased condition there is a remedy that is exactly suited. You may, like the druggist, substitute something that resembles it, but you will not get as good results as if you give exactly what is needed. The alkaloids render it easy and inexpensive to carry a full assortment, and there is no longer the excuse for this practice of substitution. As to the value of the remedies he has mentioned, much depends on the man who administers them.—ED.

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### WHOOPIING COUGH.

In the suspicious case of whooping cough of which I wrote you, by the time your reply arrived the case had begun to clear up, fever fell to normal, cough ceased entirely, and there is no sputum to test. The change appeared coincident with a change of residence of a few blocks only, and now the patient is putting on flesh rapidly.

♥ ♥ ♥ ♥ ♥ ♥ ♥ ♥

Salol has proved exceedingly effective as a remedy for irritable bladder, when the urine swarms with bacteria.

Catheter cystitis is admirably controlled by salol, which destroys the micro-organisms. Dose gr. 1 every hour.

We were living in a furnished house where the bedrooms were neither large nor light and the floors heavily carpeted. I abhor carpets in a dry climate, particularly in sleeping rooms. On our removal to this house, where the floor coverings are paint and grass mats, the child began to improve right away.

A. M. S., M. D.

—, Cal.

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There is an idea in this that seems worth passing along.—Ed.

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### "TEMPTATION."

It does my heart good to read the high-minded, straightforward, honest advice which you give in answer to Query 3236 (Temptation), and I wish to most heartily approve every word you say. This young man is on the verge of taking the fatal step, which if taken will surely lead to his moral degradation and complete ending, like his patient, who after she sinned and, as she thought, escaped the natural punishment, was perfectly willing to sin again, and now, when her folly has overwhelmed her, she wishes to cover her crime by inducing another to commit a greater. Let me say to this young physician, by all means to never allow any price, or false idea of duty, tempt him to commit the awful crime of the murder of the innocent unborn; for the commandment "Thou shalt not kill" is just as binding here as in the case were he to secretly kill the young woman that she might not be found out in her sin.

There is no reason why he should not go to her parents and make a clean statement of the case, and advise them

as to the best thing to do, that which you have advised; and if he says she is in easy financial circumstances, so much the easier to have her properly cared for, and by so doing save certainly one life, and possibly two, for there is no certainty that he would be able to save either if he gives way to "temptation."

I have protected many a young woman and thus save the life of her child, and have been better paid financially; and immensely better is the satisfaction which it gives to know and to feel that I have done the right thing.

No, Doctor, there is no price that will justify you in yielding to these temptations to commit murder, even if you are not found out; and it is almost certain that you will be found out, and in nine cases out of ten the one you try to shield will be the source of your undoing.

Thanking you for the stand taken in the matter, and with my very best wishes for the CLINIC and the principles it stands for, I am, Sincerely,

THOS. W. BROCKBANK, M. D.

Philadelphia, Pa.

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### EPILEPSY.

Case 1. Young lady, daughter of a farmer, 21, strong and apparently healthy, weight 130. She had been subject to spells since she was 9. At first they were characterized by a slight dizziness and blurring of vision, but without headache. Since that time they had been steadily increasing in severity and were accompanied by severe headaches.

At the time treatment began she had spells about once a month, and from one to ten at a time, but did not notice any connection between the spells and her catamenial periods. Appetite good and

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Salol has been highly recommended in gonorrhea and gleet; rendering the urine sterile and a germicidal injection.

Salol has been largely used as a gastrointestinal antiseptic for fermentation or mycosis, acting like salicylic acid.

digestion fair, with some slight stomach trouble, no kidney trouble, but a mild vaginitis, which seemed to be aggravated if not caused by wearing a corset. She also had nasal catarrh. Her father had been an epileptic for the last nine years. No constipation and no trouble with heart or liver.

Treatment: Verbenin 2 tablets four times a day, strychnine valerianate 1 granule three times a day, hyoscyamine 1 granule four times a day, and menthol 3 tablets a day. For the vaginitis, vaginal antiseptic half a teaspoonful in a pint of hot water on going to bed till leucorrhea disappeared. Later substituted euoral.

She had two very light spells in November. In December she was married, and had a light spell on the 26th, but no more till the middle of March, when she had five light spells in connection with an abortion brought about by injudicious lifting, being then two months pregnant. Since these five spells she has not had any more. The two spells in November were both in one day and before beginning treatment. When she had more than one spell during a month they would occur in one day.

At the time of the November recurrence the tablets of verbenin were increased to three at a dose, but no other change was made in the medicine.

It is perhaps needless to say that the corset was taken off and never worn again.

I do not care to make any comment on this case now, but leave it with the simple statement of the facts. I would, however, acknowledge here suggestions I have received in regard to the treatment without bromides from Dr. A. M.

Salol is very largely given in cholera infantum, cholera morbus and typhoid fever, as an antiseptic and germicide.

Lee. The use of *verbena hastata* was suggested to me from another source.

G. H. FRENCH, M. D.

Carbondale, Ill.

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## HAY FEVER.

After treating hay fever for the last ten years with the everlasting list of new drugs and chemicals we get daily, having tried antipyrin, iodol, euphraphin, aristol, iodine and phenol solution, with various success, I spoke to Dr. Chambers, of Jersey City, a specialist, and he advised me to try the then new drug called adrenaline chloride, in 1-5000 solution, which I did.

I must say it is to-day the best and only treatment for hay fever. I have used it in the strength of 1-500 to 1-1000, and it never fails to give relief. It is applied with an atomizer three times a day, more or less, according to circumstances. Let the CLINIC readers try it.

W. T. RADUE, M. D.

Jersey City, N. J.

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**LAWTON, OKLAHOMA.**

Some time ago I mentioned Lawton in the CLINIC, and so great was the interest manifested by the readers of your widely circulated journal that I have been afraid to tell the whole truth; like the funny man who dared not be as funny as he could. I have had to suppress many facts concerning this marvelous section of the Union. I do not like the unrest that exists among the medical profession of to-day, and I have been afraid to write because the best things of earth are not for the poor and unsuccessful,

Salol breaks up in the alkaline fluids of the bowels into salicylic and carbolic acid, to which its effects are due.

and blessed be the ties that bind the ordinary doctor to the old home and his wife's relations, where he seems to fill a niche and be able to make a living. Lawton has forty physicians, and the twenty-seven other small towns in this county are equally well supplied, who are ample to do the business; in fact, these towns are all greatly overdone.

Comanche county is fifty miles wide, seventy miles long, 8,000 feet deep, and reaches beyond the skies. Lawton was never a town, though Chicago in 1850 was an Indian trading post, and New York has a history from infancy to adolescence. Lawton was never a town, but a city from the first night, August, 5, 1901, when 5,000 people tented upon a barren field, that the following day gave every evidence of a city. The genesis of Lawton is a marvel of the century, and her birth was as instantaneous as the birth of creation, when the morning stars first sang together in commemoration of that momentous event.

Lawton is now a mile square, with 10,000 people. She will soon have a trolley line via Fort Sill (five miles north) to the base of Mount Scott, seventeen miles distant, and excursions every hour to this monarch of the Wichitas. He stands like a lonely sentinel, towering above them all, keeping vigil through all the ages over the flower of the fairest section of country the American Union kept from man and civilization so long since the discovery of the new world. Within the confines of Comanche county are half a million acres of prairie and forest reserve, that should be given to the people for homesteads. Congress may see fit in the near future to open these pastures to settlement.

Cotton is king here, but all crops that are raised in the central states do well. The skies weep in season in the night, the farmer works during the day, his granaries are full, and he prays on Sunday.

To the retired physician, or to those seeking health in a mild climate, or to the homesteader who likes to commune with nature, with the wide prairie, the lovely forest, the red man as a companion, and the best blood of the land as white neighbors, where earth, air and sky seem to blend and conspire in loveliness to entrance and bewitch the beholder, then come and dwell with us. But if the practice of medicine is your noble aim and object in life, stay where you are.

W. B. MEAD, M. D.

Lawton, Okla.

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#### MALARIA.

I congratulate and compliment you on the September edition of THE ALKALOIDAL CLINIC. The editorial entitled "A Talk with a Patient" was so good that I wish every member of the laity could read it. Your exposition of the physiologic effects and therapeutic action of atropine was the finest I ever read of any drug.

I am going to join the ranks of the alkaloidists, and cease using the fluid extracts. Am trying to interest others in the same.

I live in the "Black Belt" of Alabama, and have a great many cases of malarial fever. I have a record of over 1,500 cases without a death. In the treatment of the intermittent form, for the chill I use 1-2 to 1 dram of chloroform, in



Salol has proved an effective remedy in rheumatism but too large doses may cause carbolic acid poisoning with dark urine.

Salol has the great advantage of being comparatively tasteless, and is too valuable an agent to be neglected.



sweetened water, repeating the dose in fifteen to twenty minutes if the chill is not "broke." As soon as the chill is gone I give 1-2 to 1 oz. of Warburg's tincture, repeated in half an hour. This generally produces free sweating, and in some cases breaks the chill.

Otherwise I give 20 grains of quinine sulphate and 5 grains of capsicum six hours before the chill. Give five drops of nitromuriatic acid in a glass of water with the quinine. Use sodium or ammonium bromide to counteract tinnitus aurium. During the intermission I give the following: Quinine sulphate gr. xxx, strychnine arsenate gr. ij, acid nitromuriatic c. p. oz. iss, iron sulphate drams iss, water to make sixteen ounces. Direct: A teaspoonful in a glass of water after meals.

First I clear the "*primæ viæ*" with calomel and salts.

In the remittent form I first "clean out," and commence my quinine at 8 p. m., and give 5 grains with 1 of capsicum every hour for five doses, then every four to six hours. Reduce the hyperpyrexia with baths, tub and sponge, using ice when necessary. When the stomach will not permit the use of quinine by mouth, give it hypodermically. Bimuriate of quinine and urea is my favorite, in doses of 3 to 9 grains at a time, repeating every four to eight hours. I sometimes use quinine sulphate gr. v, acid tartaric gr. v, water m. xxv, hypodermically; but it is very irritating. If the operator is thoroughly aseptic he need have no fear of abscess.

Liquid nourishment is enforced, in the form of prepared food, soups and milk. My favorites are milk, sweet and butter-milk, pea and tomato soups. I want my patients to drink as much as possible.

The average dose of salol is a grain every hour; the maximum daily dose of 30 grains should not be exceeded.

To get them to do so I give Brodnax's acid iron tonic, 5 to 10 drops, in a glass of water, every two, four to six hours. It is composed of iron sulphate dr. ij, acid nitromuriatic c. p. oz. ij.

In the pernicious forms I use hypodermic medication only. In convalescence I give acid iron tonic, or the tonic I use in the intermittent form. When the heart flags, do not hesitate to give strychnine and glonoin.

The usual run of my patients is from three to seven days. This may seem heroic medication, but experience has taught the southern practitioner not to dilly dally with small doses. I gained a great deal of experience while hospital steward of the Second M. S. V. I. in Cuba. We did not hesitate to use from 30 to 60 grains of quinine at a dose.

H. W. THOMPSON, M. D.

Jones' Switch, Ala.

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Your treatment of malaria seems to us very effective indeed. It is a question we would like much to see settled—whether a full sweating dose of pilocarpine would not replace the Warburg's tincture, and if, as has been many times told us, one grain of quinine arsenate will replace 15 grains of the sulphate.

—ED.

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#### MACROTIN. ABORTION.

I have been a constant reader of the CLINIC for five years, and during this time I have used the alkaloids more or less. Certain local influences and associations made it almost impossible to discard the old system, and so I groveled along in darkness—no, not in darkness,

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The indication of the toxic action of salol is a smoky or dark hue to the urine, due to breaking up of the red blood-cells.

but rather in the rut of habit and mire of circumstances. For I had seen the light, at least a glimmer, sufficient to awaken a desire for more.

I have never been satisfied with the old system, with its frequent serious delays in procuring the needed remedy, and the uncertainty as to the effect of the remedy when administered, to say nothing of its bulky and unsightly appearance and disagreeable taste.

My limited experience with the dosimetric remedies had led me to hope for better things; and so I decided to adopt the alkaloidal method as taught in the CLINIC, and began the new system July 1, this year.

I have used macrotin for reflex pains in the latter months of pregnancy (three cases), and in the first stage of labor (four cases), as suggested in the footnotes, June CLINIC, with most gratifying results. In one case, with severe pain in the side and back, causing extreme nervousness and loss of sleep, other remedies, anti-neuralgic, anodyne, etc., had been used for three weeks with only partial and temporary relief. Macrocin, 25 granules in forty-eight hours, gave complete and permanent relief.

I have just read Query 3236, August CLINIC, and your reply. How strange it is that people seem so blind to the sin and immorality of criminal abortion. I have practised in this community for fifteen years, and have always declined to give the slightest countenance to such acts; but notwithstanding this I still have frequent requests for helping out some erring damsel, or careworn mother who thinks she has children enough.

Not many months ago a married woman, a leader in society and in the church, a model wife and mother, implored me

with earnest, pleading words, hard to resist, to relieve her of a three-month's fetus. When I refused, and advised her to go home and let nature take her course, she declared that she would get it done in some way. And I fully expected that she would.

About six months later, however, I delivered her of a healthy male child. When the baby was about ten days old, and when it was plain from the mother's every look and action that it was dear to her heart, I asked her abruptly, and with apparent sincerity, if she wished me to take the baby and kill it. Her answer was a look of horror. She has told me since that she had never fully realized the enormity of the crime until I asked her that question.

Several years ago another married woman, on being refused, took large doses of tansy pills, which produced severe pains and convulsions. When I arrived there were slight hemorrhage and considerable dilatation of the os. The pain and convulsions were terrific. A hypodermic of morphine gr. 1-4, repeated in thirty minutes, and almost constant inhalation of chloroform, from 2 p. m. till midnight, tided her over; and I delivered her at term of a healthy child.

Five years later I attended this child through a severe and protracted illness, and the mother was its most devoted and faithful nurse, and anxious for its recovery. I thought then of the time when she tried to kill it, and came so near ending its mortal existence; and wondered if she, too, thought of that; but I refrained from comment.

R. H. PAXTON, M. D.

Florence, Colo.

—:o:—

We once had a patient who had had



If a patient is in imminent danger from cerebral or other form of rheumatism give salicylic acid gr. 5 quarter-hourly.

A saturated solution of salicylic acid should be used in every household instead of the ordinary gargles now employed.

an even dozen children, and who came to us to get rid of the thirteenth, saying she was so occupied with her family that she could not help her husband as she wished. We knew that her husband needed no help in his principal occupation, surrounding beer; and we finally induced her to put up with her fate. About nine months later, when the baby was two months old, she broke into our office with the cry: "Hurry up, doctor, my baby, my baby!" We said, quietly: "Now, Mrs. Z., you recollect when you wanted to get rid of that child. Now that it is born and christened, just let it die." "Stop your nonsense, and come this instant to my baby," she howled. —Ed.

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# NOTES.

Having just read the last number of THE ALKALOIDAL CLINIC the spirit moves me to write about many things—perhaps small in themselves.

The alkaloidal remedies are not only convenient, but they are to be relied upon as to quality and potency. There is nothing better for pneumonia, malarial fevers and cholera infantum. The codeine pills are excellent. I give one to an infant, two or three to an adult, with quick relief of pain in bowels and soreness in limbs.

Emetin is superior to ipecac. It is the remedy for vomiting green bile. A preacher once made a positive assertion and called to any one to deny it that could. An old negro Baptist arose and suggested that he ought to add, "Not as you knows of."

A month ago cicutine hydrobromate quickly relieved pain of cancer in the eye. Fluid extract of conium (widely

advertised) failed to give relief. When I got a new supply of cicutine the pain was again relieved.

Never blister nor give calomel to a patient with Bright's disease, was the advice given to the students by Dr. Gains more than twenty years ago. The blister will not heal, but slough; calomel will increase the dropsy and cause uremia.

Query 3272: Let the patient take salix nigra aments for "weak erections and hasty ejaculations." In a week he will find himself stronger and improving, if he will be less indulgent.

Query 3254: For vomiting and hic-cough give the infant ferrum phos. and magnesium phos.

I do not confine myself to alkaloidal remedies. Dr. Gains advised us to get remedies from every source. I would willingly try the "Daucus Pusillus" on the recommendation you gave it in the September CLINIC.

Of course some of the contributors to medical journals are unearthly liars.

He who thinks that dancing will cause nervous prostration ought to have lived three generations ago, when our ancestors danced with a will, and there was less of that disease than at this time. I have had nervous prostration since 1882, when I had typhoid fever and pneumonia for seven weeks. Had eye-strain and read too much before that. Had I danced occasionally, played the fiddle and smoked, no doubt I would have found relief and comfort. Much mental labor always prostrated me.

In treating cholera infantum in this country it is advisable to begin with the mother to rid her whole system of bile. If the nursing mother is healthy, the child will be healthy also.

Of the five bad cases of diphtheria in

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Salol exerts no effect on the stomach in rheumatism, and in this respect salicylic acid is preferable.

In cystitis with micro-organisms swarming in the urine, give salol up to twenty grains a day, unless the urine darkens,

this country, four had been vaccinated, and they all died. The antitoxin was used on three of them, but on the two that died only after four days. The one that got well was not vaccinated.

Smallpox seems to die out in the United States in the months of May and June, when the pollen of vegetation begins to fly in the air. Is it possible that the pollen from wheat and corn will kill the disease? In the West Indies, where the disease is now raging, wheat and corn do not grow. I know that wheat blooms are good for some skin diseases.

The cholera epidemic in the Philippines might be put out by giving the people there copper, or sulphuric acid lemonade. Cholera never attacks the workers of copper. It never attacks those who drink freestone water or cistern water, as proven in New Orleans in 1868, when it attacked only those who drank river water. It attacks those who drink limestone water, and a weak solution of copper or sulphurous acid will precipitate lime. It has never been brought across the ocean on vessels using distilled water. If the water in the Philippines is limestone, by all means let copper be tried.

W. F. PEARSON, M. D.

Mountain View, Okla.

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### PNEUMONIA.

A few months ago you asked me to write up my cases of pneumonia. I wished to comply at once, but could not, until I saw a reprint in the *Monthly Cyclopedic of Practical Medicine*, by N. S. Davis, Jr., on the "Treatment of Pneumonia," in which not a single word was said about intestinal antiseptics, and that

was more than I could endure. I thought Davis, Jr., was from Chicago, but now I know he must be from Philadelphia. I suppose the article in question will be called a classic on the treatment of pneumonia, but like most classics it is nothing but dead bones without anything alive about it. He mentions veratrum, but does not give it proper credit. The only good thing he says is that the bowels should be purged at the onset and kept open throughout the disease, and this is spoken of only as a measure for the comfort of the patient, and is not given any credit as a true aid to curing the patient. Great Scott!

Now, before I proceed I wish to state definitely that the physician who does not recognize the necessity of thorough intestinal antiseptics in all disorders, acute or chronic, is building upon the sand; and when the floods of toxins come his way he will wonder where he is at. How long is it going to take the medical profession to learn the lesson of internal antiseptics, which is capable of doing as much for the physician as external antiseptics has done for the surgeon.

In pneumonia there is more than an ordinary need for internal antiseptics. As soon as the bowels have been purged I begin giving the W-A Intestinal Antiseptic, 10 grains every hour, for twenty-four to thirty-six hours, allowing no intermission whatever, for time is a most important element in pneumonia. For fever I use the Defervescent Compound, with veratrine added in sthenic cases. In asthenic cases I use the same compound, but omit any additional granules of veratrine. In some cases I add strychnine gr. 1-134 to each granule of the Defervescent Compound. But whatever



For thin, anemic women with scanty menses and sexual frigidity, give sanguinarine pushed up to full effect.

Sanguinarine is an effective remedy in impotence with frigidity in either sex, but must be pushed to full effect.

the case, the intestinal antiseptics go on just the same.

Once in a great while I find a case in which they do not seem to agree. In two out of eighteen cases treated with W-A the antiseptics seemed to cause vomiting. I then used Lowry's Calenduline, a teaspoonful every hour. It did the business promptly. In still another case where there was considerable pain in the lumbar region, and the temperature would not drop to normal, I used methylene blue gr. 1-50 every hour with best results.

There is another agent which every pneumonia patient who comes into my care must have, and that is nuclein. In two cases nuclein brought decided results (lower temp.) in two hours after the first dose (10 drops); and when nuclein was withdrawn after the first day, the supply having given out, the temperature rose again, to recede when nuclein was reinstated. In all of my cases I noticed that nuclein helps my patient to rally and gives my other remedies more vitality to work upon.

I very rarely use coal-tar derivatives—don't need them. When pain is severe, a little atropine is nearly all that is necessary, or I use Antiphlogistine, or a bryonia plaster.

In regard to diet, I say no food at all in sthenic cases for first two days, it only irritates. When fever is not so high, give sterilized milk with plenty of cream in it. When fever is declining I make my patients take from four to eight raw eggs a day so as to build up rapidly.

There is no need to make separate reports on the foregoing cases. All points are covered, and to those who will but heed the oft-repeated admonition to keep the bowels open and then make and

keep them aseptic, there will be no trouble to understand why pneumonia is not such a fatal disease as old statistics show.

S. F. SWANTEES, M. D.

Itasca, Ill.

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# THE VALUE OF SCIENTIFIC LABORATORY WORK.

1. On May 26th the CLINIC laboratory sent me the report of an examination of sputa. The patient was a lady, given up to die with tuberculosis. Several physicians had refused the case; others did no good. The examination of sputa showed chronic pneumonia, and with six weeks' treatment she is a well woman again, and has gained twenty-four pounds in the six weeks. How is that for high?

2. Diagnosis, Bright's disease. Several physicians had been treating the case, and had given the old fellow up to die. The laboratory report on July 30th showed differently, and the editor's letter following diagnosed the case as myelitis. I gave treatment as suggested, and the patient can now use his limbs again.

3. Tuberculosis. Laboratory so reported July 3rd. Followed treatment in Waugh's book on the Diseases of the Respiratory Organs, and the patient is getting well.

4. Laboratory examination showed abundant tubercle bacilli, mixed infection and pus formation. The patient will be among the angels in about two days.

5. Laboratory examination dated August 8th. This was a case of chronic ulceration of the bowels, and not a tubercular enteritis, as had been diagnosed by her several physicians. She had been

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Before giving any drug for the wife's frigidity suppose you try kindness, consideration love and appreciation.

Sanguinarine is the best of the stimulant expectorants, increasing the sensibility of the respiratory mucosa.

an invalid for two years, and was brought to me on a stretcher, unable to walk. I gave her sodium sulphocarbolate gr. v and a dram of Glyco-Thymoline (Kress & Owens) every two hours. In less than thirty days' treatment she is now able to walk the streets, and is gaining like a cyclone. The patient calls me the wonderful man. I did not tell her that Drs. Waugh and Abbott deserved the credit in her case (that was selfish), but it would not do you any good, and it did me considerable to have her think it was *all me*. The tubercular case is certainly going to be a cure.

H. M. MARKS, M. D.

Platte, S. D.

—:o:—

That's all right, Doctor; we are not after credit. All we want is that the ideas we gather shall be used with as good judgment as you have shown, for the good of the sick and the suffering, and that the medical profession may renew their faith in active medication.—  
ED.

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#### SYNOPSIS.

In the spring of 1852, clothed with the honorable distinction of an M. D. at the last end of my name, and known as the boy physician of my neighborhood, in May of the same year (1852), using a Bible term, I sought and found a woman, as an helpmate, and we gathered our traps up and moved into the town of West Mansfield, Ohio, to seek our fortune and grow up with the country. The budget of this article is to show the contrast of the general treatment of the diseases at that time and the present day. I am safe in saying that

seven out of every ten patients were started out on calomel, jalap, bleeding, blistering, and an emetic. It mattered but little about what the diagnoses were, these were the remedies in common use to develop the disease.

At this period of the profession every physician, to a certain extent, was his own pharmacist, preparing tinctures, pills, powders, etc., out of crude materials. In fact, I practised for several years before tinct. of veratrum viride came in common use in the profession, many physicians having great fear of its poisonous effect. Digitalis and aconite, as one of our best known remedial agents of to-day — strychnine — were seldom used, except in consultations over some extreme case. Thus you see, my brethren, what grand and glorious privileges you now enjoy as compared with forty-five or fifty years ago.

To-day you have the Dosimetric Trinity, nice and clean, to combat your fever cases, with aconitine to reduce pulse and temperature, with strychnine to brace up heart action in nine cases out of every ten of all low and tedious types of fever, while we aged ones had to rely upon nitrous ether, carb. ammonia or spr. frumenti to build up the system, quinine and calomel to break up our fevers. Again I say, blessed are ye of to-day, rejoice and be glad that you live in a day when the light and truth of medical wisdom and knowledge shine forth so vividly on the pages of our medical lore, that no man need err therein. I regret to know that just at the time when the practice of medicine is a pleasant undertaking and easy task, while every article worth looking after in the materia medica is being brought forward with all its medicinal qualities that never before in

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Perhaps the best way to make nurses comprehend the action of sanguinarine is to tell them it makes one cough harder.

In infants and the aged the sensibility of the bronchial mucosa is low and sanguinarine is needed often to save life.



the science were demonstrated to the profession, that I must lay off the profession of so many years, just at the time of the experience in my life that I am fully able to appreciate and practise the science in a more intelligent manner with the new products now prepared by the Abbott Alkaloidal Company. This company is a great revelation to the young physician of the twentieth century, and my desire is that in the future, as well as in the past, they may seek to attain higher and higher in medical lore, until there will be no doubt in regard to the unmistakable fact of medicine as a science, demonstrated by our remedies at hand.

In closing I have to say, *bis pueri senes.*

A. ROBERTS, M. D.

Pekay, Iowa.

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### TYPHOID FEVER.

I find in the June issue three different articles on typhoid fever, supplemented by approval of the editor of the CLINIC; and how any novice in medicine could get any insight as to treatment or pathology of the disease was beyond my ken.

The "What Is Typhoid Fever" was never hinted at, and the treatment was of any kind but "specific," if it had any particular object at all; and if the enteric trouble which is so frequently added to the gravity of the case was lacking, the treatment would furnish all that was necessary to destruction of human life, which adds such terror to the disease. All offered calomel, and if anything would irritate the stomach and inflame Peyer's glands, I do not know of any-

thing that would be better for that. If it has any redeeming virtues I have never found them.

I learned the disease forty years ago from a preceptor who served five years as surgeon of the army, along the Rio Grande river in Texas; and the first case of typhoid fever we had, in issuing medicine to the patient he asked if calomel would be admissible, but his reply was in the negative, so I have never used it, and I never think of losing a case.

As an initiative I will say that I do not consider typhoid fever a "generic fever." The term merely means low, low vitality of the life forces, weak, soft pulse, no secretion, very often pale, broad tongue, pulse anywhere from 80 to 120, sometimes headache, always bodily aches and no disposition to move around. I saw lately where an "old school" bug-hunter had found typhoid germs; didn't say whether he got a pension or not. The treatment, as a rule, must be quieting and unirritating.

In my practice I use a powder composed of camphor, nitrate of potassa and powdered ipecac, *aa* 1 dram, finely triturated in mortar, and when that is done I add 4 ounces of sacch. lactis or cream tartar, and thoroughly mix; you see, Dover's powder without the opium—as good a diaphoretic as I can conceive, and good medicine in most all fevers if a diaphoretic is needed, and to which anything indicated therapeutically can be added. The use of this powder is to equalize the circulation in the system.

In the morning when there is cessation of fever, pulse soft, and fewer heartbeats per minute, I add to 5 grains of said powder 1-4 to 1-2 gr. of quinine, 2 gr. leptandrin. M. Sig. One every two hours till noon, alternating with se-

When the bronchial mucosa is dulled by age or in infancy the patient may drown in his own sputa. Give sanguinarine.

In atonic conditions of the stomach and bowels, with mucous secretion, sanguinarine is an effective tonic-vitalizer.

date, a teaspoonful every two hours between doses, viz., gelsemium 10 drops, verat. viride 10 drops or aconite 10 drops, to water 4 oz; whichever sedative is indicated in the case. Sometimes the sedatives are mixed to add to their power.

Afternoon, diaphoretic 5 gr.; if action of bowels is needed 2 gr. pulv. rhei, and other additions as pulv. ipecac if relaxing effect is insufficient, every two hours till 10 p. m., alternating with dram doses of the sedative. If other remedies are specifically indicated, use them in small quantities.

I propose by this treatment to reduce the pulse to 70 or 80. I never give quinine unless there is a soft and smooth pulse, if it takes two weeks to get it to that state.

I have been in central Kansas ten years, and have never seen a case of typhoid fever. Our fevers here partake of the mountain fever type—sthenic—that by proper treatment must be closed out the ninth day. The old school treatment requires from two to six weeks, and very frequently ends in a funeral. I use alkaloidal remedies whenever possible.

J. N. RALEY, M. D.

Reading, Kan.

—:o:—

Doctor, you are a very careless reader. Please remember this: Nobody has a right to criticise what another man says until he thoroughly comprehends just what the other man says and means. Now, when you speak of my approving the articles on typhoid fever in the June CLINIC, I don't know what to say to you. One article had no comment. The second had my own treatment, which surely

did not agree with the writer's; and with the third article, all I said was that with most of what he said I heartily disagreed. Mountain fever is typhoid fever.—Ed.

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#### **PNEUMONIA.**

I was a little skeptical about aborting pneumonia, as reported in the CLINIC, but I either made a wrong diagnosis, or the Defervescent Comp. and W-A Intestinal Antiseptics, preceded by calomel and soda, followed by sodium phosphate, did the work.

The case was like this: Girl, 15, temp. 104 F., resp. 36, pulse 120, pain near right nipple. History of hard chill.

Next morning, brickdust sputa, temp. 102, resp. 26, pulse 108. All the symptoms subsided by the third day. Got four visits. If an older sister had not had it the family would not have believed the disease pneumonia. The lower right lobe was completely engorged. She had just had her menses, or I might have attributed the attack to vicarious menstruation.

I never questioned my diagnosis in such cases till this one.

F. M. JEFFERS, M. D.

Lafayette, Ind.

—:o:—

It is very funny, Doctor, how many men commence to question their diagnosis of pneumonia after trying our methods. It makes us laugh.—Ed.

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#### **TYPHOID FEVER.**

I have been a subscriber to the CLINIC almost if not from the beginning. While not a thoroughbred alkaloidist in the sense that I prescribe granules to any

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In cough with dryness of the throat and larynx, sanguinarine in small doses benefits by stimulating the vitality.

In many sore throats sanguinarine by stimulating the vitality enables the tissues to throw off the disease at the outset.

great extent, I am yet imbued with the principle that helps me prescribe any remedy with a greater intelligence than I otherwise could, were I not a reader of the CLINIC.

Many years ago I read Dr. Waugh's report on typhoid fever to the Pennsylvania State Medical Society, and followed his teaching with the same success that he then reported. I lost my first case about two months ago, and that was from perforation and hemorrhage, after I had guided the case to an almost successful end.

It grieved me very much, as I had the honor of saying that I had never lost a case in seventeen years' experience, and hoped for the honor for many years to come.

J. H. FRETZ, M. D.

Lambertville, N. J.

—:o:—

There are some things we can control with medicine; but, Doctor, sometimes the patient's constitution is such that he will die in spite of us. That you lost no case in seventeen years is such an honor that, unless you object, I am going to publish your letter. Sometimes the stock of vital force with which people are endowed is exhausted. Then comes along something—a whiff of pneumonia, a touch of typhoid, a pinprick—and the malady gets the credit of their death, when the simple fact is that their stock of life has been exhausted.

—Ed.

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### THE SLOW FEVER.

I have been a reader of your CLINIC off and on for three years, subscribed for it one year, and have used your granules occasionally, but must confess very skeptically.

In acute respiratory maladies with constriction of the chest and obstructed respiration, sanguinarine relieves.

Sometimes I was on the verge of writing you to please stop sending me your journal, and again I would see some article that I thought contained a great deal of sense. Since you stopped publishing the articles on Sexual Hygiene, in which I could see nothing instructive or elevating, I have rather fallen in love with your CLINIC.

I am anxious to learn more about alkaloidal medication, as it certainly has a great many advantages over the old way of practice, and is rational and scientific.

We have here in Oklahoma a fever which I call typhoid, which differs somewhat from the typhoid I used to see in the South. After prodromata of from three days to a week, in which the patient complains of headache, aching in the bones, dizziness, loss of appetite, and general malaise, the fever rises to 102 or 103. The tongue is coated, a thin white, with red tip and red edges, the papillae stand out prominent and red, giving a strawberry appearance. There may be constipation or diarrhea, but no tenderness in the right iliac fossa. The fever in some cases is highest in the morning, in others highest in the evening, and in others highest about midnight. Some cases perspire profusely, even before treatment is instituted, others have a dry, hot skin. Epistaxis occurs, but by no means regularly, and I have never yet seen a typhoid rash in this section.

After a day or two the fever rises to 105 or 105.5, and is very persistent, but may drop suddenly to 100 or 101, then assuming the step-ladder type, gradually going back to normal. Delirium is not a rule, but usually after the first rise of temperature; and if the patient is

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One needs his wits about him when he tries to utilize sanguinarine in acute throat and pulmonary affections.

put to bed he feels comparatively comfortable.

The disease if not treated runs a course of four or five weeks, and is termed by the old settlers "the slow fever," and very appropriately, too.

The treatment I have used with most success in this is 3 to 5 grains of calomel, in repeated small doses, followed by Epsom salts next morning; zinc sulphocarbolate 2 grains every two hours; acetanilid, salol, 4 grains each, and caffeine citrate 1 1-2 grains, every four hours to an adult. I keep up a therapeutic diarrhea, as it were, by giving teaspoonful doses of a saturated solution of  $Mg\ S\ O_4$  every two to three hours. The cold sponge is employed as often as required, but under this treatment is seldom called for more than two or three times in twenty-four hours.

The diet is strictly fluid and nutritious, allowing plenty of cold drinking water or lemonade. If the kidneys seem sluggish I give an occasional dose of spirits of nitre, and if tympanites occurs I give turpentine internally, and use soapsuds enemas, which usually gives great relief.

As the fever abates I give strychnine and digitalin liberally, withdraw the acetanilid and salol, continue the sulphocarbolate, giving it four hours apart instead of two, stop the  $Mg\ S\ O_4$ , but give a turpentine emulsion. If there is any sign of cardiac weakness I prescribe whisky or brandy, in the shape of eggnog or milk punch, and as the disease subsides I gradually withdraw all medication, hanging on to the strychnine until the patient is up and around.

During the whole course of the disease I attempt to give no drugs whatever after 10 p. m., unless the patient

should be restless, when I administer an occasional dose of Dover's powder; but commence medication at 5 a. m. I find that the majority of my cases get well in from twelve to eighteen days, and the mortality has been 5 per cent, death resulting from hemorrhage or perforation.

This, of course, is only a brief outline of the disease and my treatment, but will enable you to see where I am right or wrong; and I should be glad to hear some suggestions from you in the way of alkaloidal medication.

E. F. SANDBERG, M. D.

Fass, Okla.

—:o:—

I fully appreciate your remarks as to the methods we use to win the attention of physicians. All we ask of any sane man is an investigation. The truths of alkalometry are so simple, so self-evident, that no reasonable man can help but admit them, if he once takes the trouble to investigate; but my dear Doctor! it is hard to get some men to move out of their ruts. They are so afraid that a little mental exercise will be required of them that they shut their eyes and ears and refuse to see or listen.

As to your fever, my impression is that you would do better to largely increase the sulphocarbolate. Your description recalls strongly a fever I treated in the East many years ago, by giving zinc sulphocarbolate about 5 grains every hour. Recently, while typhoid is widely epidemic in Chicago, I am having many cases which look typhoidish, with which I have been using the following mixture: Powdered potassium chlorate 1 dram; put in a four-ounce bottle and pour in 1 dram of strong hydro-

In acute catarrhs stimulate vitality with sanguinarine in very small doses to help tissues throw off disease.

The dose of sanguinarine is gr. 1-67 every five minutes till the desired effect is manifested, then less frequently.

chloric acid. Effervescence at once begins, and as the bottle fills with chlorine fumes, fill up with four ounces of water. Of this I give one or two teaspoonfuls before meals, or more frequently, throwing it away as soon as the green chlorine color disappears, when I have a fresh lot prepared. This acts promptly and powerfully. In one of these cases I had the blood examined and it gave the Widal reaction for typhoid fever perfectly. With this chlorine mixture and the sulphocarbolates the man was well in less than a week. Either that was a case of typhoid fever aborted, or there is no such thing as a diagnosis of that affection. —ED.

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**A TWENTIETH CENTURY CODE  
OF MEDICAL ETHICS.**

Thy diploma, if from a reputable medical college, shall be thy passport to practice thy profession any and everywhere; all others shall pass a medical examining board, and pay a license fee.

(How long, O Congress at Washington, before this is enacted into a law?)

Thou shalt not be polluted by the smell of rum or other intoxicants while on duty as a physician in the sick chamber.

Thou shalt not be guilty of hypocrisy by taking one end of thy tongue to make the other end a liar.

Thou shalt not deceive the sick to make money—those who do so are medical assassins.

Thou shalt know but one school, viz.: Medical Equity.

Thou are a quack who art a secret nostrum vendor.

Thou art justly entitled to all the commercial benefits to be derived from any

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As disease is always significant of deficient resisting power, the use of a vitality-stimulant is evidently indicated.

discovery of worth and merit as a physician; and when it is exploited in an ethical manner, thou shalt be regarded as a benefactor.

Thou shalt do unto a worthy and well qualified, honest and truthful, brother physician, that which you would have him do unto you; and unto your patients that only which an honorable and conscientious brother physician would not dare to try to undo.

If there be another point worthy of your attention, it is briefly summed up as follows: Let your life and habits and actions be such that the world is better by your having lived in it. To God, your country, your profession, and yourself, you owe this duty.

J. ZACHARY TAYLOR, M. D.  
2023 St. Paul St.,  
Baltimore, Md.

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**ANODYNE.**

What do you think of this formula for a "pain killer"? Its effects are truly magical.

Morphine gr. 10, chloral hydrate and camphor each oz. 1-2, amyl nitrite drams 2, chloroform oz. 1, oil of cloves and cinnamon each drams 2, pure alcohol oz. 4. Dissolve the morphine in a little of the alcohol, rub together the chloral and camphor, and add the dissolved morphine and other ingredients, the amyl last. Then add 3 drops of strong sulphuric acid, which keeps the morphine in solution. Dose, 5 to 20 drops, on sugar, repeated every thirty to sixty minutes, as needed for pain. For headache inhale from nostril to nostril, and apply over the seat of pain.

Don't neglect to have a fresh supply of calcium iodized ready for the next case of croup. May be your own child.

This will stop any kind of pain almost immediately, and does at least seem magical in its quick action on the nerves. I have applied it over the closed eye, holding the finger wet with it to the skin for a minute or two, securing counterirritation which would soon result in a blister. I cannot speak too highly of it. It may be used for slight pains or neuralgias of the eye, tender teeth, in fact in all pains anywhere. It will be very, very hard to excel it. The only objection is its cost—about 25 cents an ounce.

J. A. BURNETT, M. D.

Calumet, Okla.

—:o:—

It is no doubt a very efficient combination for the relief of pains; but I doubt if the morphine is a necessary ingredient. Possibly the substitution of atropine would render it more effective. —ED.

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#### AMERICAN ALKALOMETRY VOLUME II.

Enclosed find money order for 2.00, for which send me Volume II., American Alkalometry. Some way or another I have overlooked the matter, but I have the first volume, and have found it very valuable for reference. It is worth ten times its price.

T. L.

—, Miss.

—:o:—

Volume I. of the American Alkalometry contains reports of CLINIC teachings from '94-'97, inclusive. They are arranged with an exhaustive cross index and are very valuable for reference.

Volume II. is the next two years—'98-'99—and similarly arranged. They

C. P. Carbolic Acid painted all over a burn or a scald stops the pain instantly—no further dressing.—B. H. Brodnax.

are companion volumes of something over 800 pages each, and should be on the shelves of every member of the CLINIC family.

Volume III., which will contain our work for 1900 and 1901, is in preparation.—ED.

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#### "TALK WITH THE PATIENT."

If you republish that editorial entitled "A Talk with the Patient" I want some for distribution.

C. T. A., M. D.

—, Nev.

—:o:—

We will republish in pamphlet if there is enough call for it. Better send the Journal.—ED.

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#### BETTER DOCTORS.

Since I have been a subscriber to the CLINIC I have become a better doctor, for I find it chock full of good and wholesome medical literature, from cover to cover, and something that will help in time of need. I have been practising alkalometry, and find my little pocket-case to be my *vade mecum*. I hardly see now how I ever practised without it.

A. M. CLOUD, M. D.

Alanthus, Tenn.

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#### IN THE DARK ZONE.

"Well, Starling, I leave you some medicine; three powders. You will take one at 3, 6 and 9 o'clock."

"Will de' ack, doctor?"

"Yes, Starling, I expect them to act."

This was the R: Podophyllin gr. 6, milk sugar gr. 40; three powders as above.

Silver nitrate gr. 1-4 in a dram of water, for gastralgia. The second dose, in one hour, cures.—B. H. Brodnax.



Two days later:

"Well, Starling, how are you coming on?"

"Don't ax me how I'm comin' on—ax me if am 'ur!"

N. F. KIRKLAND, JR., M. D.

Kline, S. C.

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### TYPHOID FEVER.

Typhoid fever has no terror for me, with the W-A intestinal antiseptics and defervescent compound. My typhoid patients get well now in three weeks, when formerly it took six, and then some died. None die now.

—, Ohio.

A. H. C., M. D.

—:o:—

It needs no comment—it's all there. The man who cannot take that hint is too set in his views to be within the reach of reason.—ED.

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### EPSOM SALTS, BEER, WHISKY AND OTHER THINGS.

Were all to use Epsom salts as you advise, there would be consumed 500 tons quarterly. Epsom salts were used several hundred years before Chicago was born, let alone THE ALKALOIDAL CLINIC. So with calomel, to say naught of aconite, belladonna, jalap, ipecac, etc., *ad infinitum*.

One of your sins, and it's a serious one, you do not prescribe whisky, much less that filthy, bitter, useless "slop" or swill, beer. A man, firm, municipality or state that is not ready or willing to sneeze when a brewer takes snuff, or laud beer or its malt products, must expect to bump his head against a stone wall. Anyhow, he, she or it will get bumped.

♥ ♥ ♥ ♥ ♥

Rattlesnake bite: Cord part, incise wound, inject in and about with pot. permang. then sustain heart with strychnine.—Scroggs.

Whisky is harmful enough, but beer is a meaner and a more harmful beverage than whisky. A whisky drinker may survive an attack of pneumonia, the beer-swiller never. An excessive beer-drinker gives Death a mortgage on himself, and at the first opportunity Death forecloses on him.

I consider beer a prime factor in the increase of Bright's disease. Man's kidneys were made to drain a body of a reasonable amount of water—and other material—dead, used up material, and not of alcohol and ten to a hundred times its needed amount of water. I take it a man would never drink a glass of beer were it not for its alcohol. Take the latter out and he would—probably—say, "When I want a drink of hop (?) tea and dishwater I'll let you know." Three per cent alcohol beer is as much too thin a drink for an American palate as wine is to a Scotchman's. If all or a large percentage of doctors would use alkaloids, as they most assuredly should, what a lot of alcohol would remain unused. Only to think of the horrid mixtures of dirt, useless stuff and nauseous "stodges" that would be kept off the market. Whew!

Years ago I was called one bitter cold night—thermometer 15 degrees below zero—a northwest wind howling down the small river where at one point the rocks stood 800 feet almost plumb, 400 feet on the other. A good woman had a neuralgia in her jaw. Her doctor had told her nothing but cutting out part of her upper jaw would relieve her. I gave her some medicine—largely morphine. She said with deep satisfaction: "Thank the Lord, I've got medicine again I can taste."

- Some folks do like that kind. Some

Calomel gr. 10, and potassium nitrate gr. 20, three doses each given alternately, will abort erysipelas.—B. H. Brodnax.

want medicine that will move things like the Thomsonian "ripgut."

I once had a patient—sensible man, too—the fact that he employed me was *a priori*, or *prima facie* evidence. He complained that my medicine did not act. I said: "You are better than you were?" "Yes, getting better right along." "What more do you want?" "Well, it seems as if medicine was acting better if it made itself felt."

Years ago there was an epidemic of dysentery in Vermont. Had some hard cases, but fortunately all got well except an old lady, 78 years of age. A doctor told me he gave Epsom salts and Dover's powder—never lost a case under that plan. I put an ounce of salts, paregoric and aromatic syrup rhubarb in a half pint bottle, for an adult, filled with water; tablespoonful every hour till blood stopped. That usually occurred in twenty-four hours. I always gave a few small doses of calomel at first, especially to children. Every case to be kept in bed for at least two days after blood in stools ceased. The "in bed" was a *sine qua non*. Wall, I guess—and I was born in York state at that.

I have written all a busy man will care to read. May peace and prosperity chase you through life.

G. H. VAN DEUSEN, M. D.  
Strattonville, Pa.

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#### SCHOOL OF ALKALOMETRY.

In the August CLINIC, J. D. B. calls for a school of Alkaloidal and Advanced Therapeutics. I claim to be the first to suggest such an innovation. We are rapidly approaching the time for such a blessing. My ideas of remedial action through reflex action of the nervous sys-

tem will prevail. Old orthodoxy must give way to advanced scientific truth. Humoralism, with all of its absurdities, will be relegated to the rear.

Your plea of dormant gray matter will not suffice. I have indicated in former communications the basic outlines for such a work. It would revolutionize the medical world.

T. J. SCOTT, M. D.

Aloin, Texas.

—:o:—

I fully agree with you, but there are some preliminaries which must first be attended to. One of these is the financial one. To properly launch an enterprise of that kind will cost much "gelt," and this, if present conditions come out as we hope, will be secured within a year.  
—Ed.

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#### TEMPTATION.

It does my heart good to read the high-minded, straightforward, honest advice which you give in answer to Query 3236 (Temptation), and I wish to most heartily approve every word you say. This young man is on the verge of taking the fatal step, which, if taken, will surely lead to his moral degradation and complete ending, like his patient, who after she sinned and, as she thought, escaped the natural punishment, was perfectly willing to sin again, and now, when her folly has overwhelmed her, she wishes to cover her crime by inducing another to commit a greater. Let me say to this young physician, by all means to never allow any price, or false idea of duty, tempt him to commit the awful crime of the murder of the innocent unborn; for the commandment, Thou shalt

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If the bowels have been previously cleared out, a single five-grain dose of acetanilid will abort a chill.—B. H. Brodnax.

Guaiacol pure, 5 drops rubbed into the skin over a pain, will stop the pain in a few minutes.—B. H. Brodnax, M. D.

not kill, is just as binding here as in the case were he to secretly kill the young woman that she might not be found out in her sin.

There is no reason why he should not go to her parents and make a clean statement of the case, and advise them as to the best thing to do, that which you have advised; and if, as he says, she is in easy financial circumstances, so much the easier to have her properly cared for, and by so doing save certainly one life, and possibly two, for there is no certainty that he would be able to save either if he gives way to "temptation."

I have protected many a young woman and thus saved the life of her child, and have been better paid financially; and immensely better is the satisfaction which it gives me to know and to feel that I have done the right thing.

No, Doctor, there is no price that will justify you in yielding to these temptations to commit murder, even if you are not found out; and it is almost certain that you will be found out, and in nine cases out of ten the one you try to shield will be the source of your undoing.

Thanking you for the stand taken in the matter, and with my very best wishes for the CLINIC and the principles it stands for, I am, Sincerely,

THOS. W. BROCKBANK, M. D.  
Philadelphia, Pa.

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# **"TEMPTATION, 3236."**

Allow me to congratulate you in regard to your answer to the above young physician. The answer is worth a fortune to any physician who is starting out in life. It sounds like the training of De Laskie Miller, thirty-five years ago. In my opinion, no good physician will

ever become an abortionist, or, to use my own words, *a murderer*. The young doctor in case 3236 says: "If she were my sister, I would say it was my duty." Never. Remember the command of our Great Physician: Thou shalt not *kill*. I would say to this young doctor, you are on dangerous ground. First, you would violate the laws of your country and commit murder. Second, you are about to violate God's law. Go to the father, tell him the whole truth about his daughter. Help him to select a home, where his daughter may well be cared for until her child is born and the mother is well. Then let her come home, and if a true woman she has been purified by her trial, and she can then begin life over without the stain of murder; and if a few too fine women point at her the shaft of shame, say to them for me: "Let the one who is without sin throw the first egg." No, doctor, don't learn how to perform an abortion. Don't do it.

Some years ago I had a wealthy female patient who bored me beyond endurance, saying: "Your price is no object to me." My reply was: "Madam, I need your cash very much, but you have made a *grand* mistake. I have no price. I never took a dollar stained with blood, and I never will."

In a few days she again renewed the temptation. My answer to her was: "Are you a member of the Catholic Church, and in good standing?" "Yes." "Well, if you bring me an order from your priest that he desires me to produce an abortion for you I will do it." Great Scott! I can hear her howl now. The child was carried to full term.

How I do wish all young doctors could realize how honorable is the profession they have selected, and work to

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If the bowels are empty and clean, aconitine will abort a chill by bringing on the sweating stage.—B. F. Brodnax.

Zinc sulphocarbolate gr. 3 to 5, given every hour or two, will check a dysentery, or "bloody flux."—B. H. Brodnax.

build it up. The above will apply to some older ones. But let the young man learn to say yes, and no, just once. Be not tempted to become a criminal. Make a reputation for the truth as your light sees it. Perhaps you must say, I don't know, in some cases, but say it in plain words, and in years to come your patients will honor you. Charge a fair, honest fee to all who are able to pay you. Charge the poor also, but donate a part of the fee to the worthy.

Enterprise, Miss.

\* \* \*

—:o:—

The question in these cases is not what to do, or what to say, but how to so say it that it will carry conviction. Simply refuse, and the woman will go around till she finds somebody weak or unprincipled enough to gratify her. Show her another way out; that's all she wants. Appeal to her better nature—every woman's form surrounds an angel. If you can aid her to get the mastery of that other angel she carries, do so.—Ed.

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#### TEMPTATION.

I want to say to you that your advice to the young doctor, Query 3236, is the right thing; in fact, it is the only right thing. Let him show himself to be a man at the start, and such temptations will cease to come to him. I once advised a young lady to have a young fellow arrested and obliged to marry her, and even went to the officer myself to see that it was done. They have lived together for years, happily, and I was there when the first heir arrived.

V. E. LAWRENCE, M. D.

Ottawa, Kan.

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Tannic acid, gr. 3 to 5, taken in water, will often check that troublesome malady, vomiting of pregnancy.—B. H. Brodnax.

If you had never written another line than your reply on page 800 of the CLINIC, to "Temptation," you would still be entitled to a place with the "Immortals."

The man who has practised medicine for a number of years can say "Amen" out of a full heart.

A. L. BLESS, M. D.

Guthrie, Okla.

—:o:—

I am rather surprised at the outburst of approval of that reply. The heart of the medical profession is sound, God bless it; and when a question of morality, of honor, of duty, comes up, there is a demonstration that ought to cure the worst pessimist, who can see no good in anyone or anything. There may be a few who disgrace our cloth, but they are nothing to the sterling worth of the vast majority.—Ed.

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#### POST GRADUATE WORK.

If *The Surgical Clinic* proves to be as good an investment for me as THE ALKALOIDAL, I shall be obliged to double the gratitude I already feel toward you and your work. I take a great many journals, both American and foreign; but I must honestly submit that I receive more real benefit from the CLINIC than from all the others. A young medical friend of mine asked me the other day what post graduate school I could advise. I replied that the best post graduate work that I could recommend was THE ALKALOIDAL CLINIC. Another of my stiff-necked medical friends asked me

Carbolic acid 3 drops, boric acid 10 grains, water one ounce, make a good eye-water.—B. H. Brodnax.

what journal I preferred. I replied, "The CLINIC." "What!" said he, "do you read that journal? Its interests are wholly commercial." I replied that I thanked God, then, for commercialism.

Sincerely hoping that you may continue to be successful in your great work of medical education, and that *The Surgical Clinic* may prove to be as successful as the CLINIC.

J. H. BURCH, M. D.

Baldwinsville, N. Y.

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### ASTHMA.

I have had a successful bout with asthma of hay fever, which yielded to a granddaddy's remedy: Mixed goose oil and fluid extract of lobelia; saturated a piece of absorbent cotton with the mixture, and applied it to the chest. Two mornings later the asthma had almost vanished.

J. R. PHELPS, M. D.

Dorchester, Mass.

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### THE CLINICS.

It was not necessary to urge me to subscribe for *The Surgical Clinic*. Not to do it is to deprive one of the most instructive medium in this line of the profession. One has to look only at THE ALKALOIDAL CLINIC to know what to expect of the *Surgical*, which is edited by the same able authorities. I am a stranger in this city, and not licensed yet. Hope to be soon. The profession does not yield me anything yet, but although I have a hard time to get along, I would not be without the *Clinics* if I would have to give up smoking. The *Clinics* represent the new school, and a physician fitted out in this spirit will be able

to fight any disease, like a soldier with a Gatling gun against bows and arrows.

I hope soon to be able to order all the books issued by your house. If they are as good as the *Clinics*, they are priceless. I learned more from the *Clinics* than from all the text-books together. Of course the text-books are all right and necessary, but they only explain the instrument, while the *Clinics* put the same instrument in one's hands and guide them to use it skillfully and to advantage.

I. H. FINKELSTEIN, M. D.

St. Louis, Mo.

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We supply the missing link.—ED.

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### ABORTION.

I write to congratulate you on your excellent reply to Query 3236. Nothing is more commendable in journalism. Nothing would sooner win my approval. Thank God for such words, especially in this day of lax morals. I fear we as physicians are often too ready to expose the genital organs of young ladies, and thereby open new thoughts and put our patient on the road to ruin. I commenced the practice of medicine with the determination never to be led astray or bought to do wrong, and I have kept it strictly. I see our young men thus going in the forbidden path. I am sorry for them, and I hope our colleges will impress this matter.

H. J. NEELY, M. D.

Butler, Pa.

—:o:—

Shake, Doctor. I recognize a congenial spirit. God knows how true your words are. You may have noticed how frequently I have urged that such ex-

Acetanilid five grains, given to chickens with cholera, cures them in twenty-four hours.—B. H. Brodnax. Wish I'd known it.

Scorpion sting or tarantula bite: Ammonium brom. gr. v, often; strychnine hypo. for heart; whisky harms.—G. A. Scroggs, Ariz.

aminations should be made exclusively through the rectum; in fact, this should be the rule, and when necessarily an exception occurs, an anesthetic should be given.—ED.

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**DAUCUS PUSILLUS.**

Rattlesnake weed or master grows in south Nebraska and north Kansas, and is used in domestic practice, in connection or combination with skunk cabbage, for blood poisoning, unhealthy ulcers, suppurating wounds, etc. A fine dressing.

A. L. STIERS, M. D.

Stella, Neb.

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## HEMOPHILIA.

After reading the report of a case of hemophilia, I should like very much to report a case that I had not long ago: Wm. D., a sailor, age 25, single, very anemic, history of several attacks of nosebleed that lasted for days, and had to have hospital care. He came to me suffering from a severe epistaxis, which had lasted for two and a half days. He was very weak from the loss of blood, and fainted before I could get him into bed.

I washed out the nasal cavities with a saline solution, and followed it by an application of adrenalin chloride 1-2000 to the mucous membrane, plugged the posterior nares, put the patient to bed, applied an ice cap to his head, and gave him atropine sulphate gr. 1-50 twice a day; also strychnine sulphate gr. 1-30 every six hours, and as I found the blood to be very slow in coagulating, gave him calcium chloride gr. xx three times a

day, which made the blood much thicker, as I found on a later examination.

The adrenalin when used seemed to check the hemorrhage very well, and I would say that it is one of the best styptics I have ever used, but the only fault I have to find with it is that it has to be used most carefully, for with some patients the after-effects are very unpleasant indeed.

GUY CLUXTON BOUGHTON, M. D.  
Harrisburg, Pa.

## BELLADONNA.

In the July CLINIC, page 647, is an article on belladonna. While concurring largely in the views therein set forth, there is one valuable action of belladonna which is not mentioned by the writer, which I have proven repeatedly to the evident saving of life; and to which I desire to call attention, as it is the season when it may save others.

My first case in practice, over thirty years ago, was one of cholera infantum, with bloody discharges. I do not remember to whom I am indebted for the idea, but three doses of atropine six hours apart, gr. 1-60 to 1-100, caused distinct redness of the skin universally, to the mother's alarm, but stopped the bloody passages, and with other adjuvant treatment the boy went to quick recovery.

Since then I have used this remedy in many cases, some of exceeding gravity, with great loss of blood, and always successfully, with doses to suit the age.

A. A. FREEMAN, M. D.

Whitewater, Wis.

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The use of atropine is a perfectly legitimate application of correct therapeutic

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I have never found any other metal that exerted the curative effect of the silver salts on mucous membrane diseases.

Silver nitrate in strong solution, 25 per cent, applied to the scrotum in orchitis, powerfully subdues the inflammation.



principles. It sedates the irritated gastrointestinal ends of the pneumogastric, which is just what we want. I believe it was Lauder Brunton who first suggested this. An English surgeon serving in India has applied it successfully in the treatment of Asiatic cholera.—Ed.

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### WE'RE DISCOVERED.

Coming into possession of a few of the W-A Intestinal Antiseptic tablets, I commenced giving one every three hours to a patient who had had typhoid fever for fourteen days. Temp. 103 to 104.5, bowels very active. In three days temp. dropped to 99 to 101, one stool in twenty-four hours; all hopes for a rapid recovery. All I fear is that the tablets may not dissolve in the intestinal tract, as they are so hard. I have given them pulverized and in a No. 2 capsule. I began their use on the fourteenth day of the fever.

W. G. H.

—, Mo.

—:O:—

So you have discovered the intestinal antiseptic tablets, have you, Doctor? I congratulate you. It is just as well that you should give them in the way you say, although their hardness is designed to prevent solution in the stomach as much as possible. If you look through the CLINIC I think you will find some other ideas well worth your attention.—Ed.

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### A KNOCKER.

I am a "*clerico-medicus*," use the splendid alkaloidal preparations for my family, myself, and occasionally give them to the poor. The cost is small, the

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The local and internal uses of the silver salts have been sadly neglected during the present prevalence of surgery.

benefit great. The Bible is my only guide in theology, THE ALKALOIDAL CLINIC in medication.

The other day I sold a one-pound tin of Saline Laxative to a person. He used it and went to the drug store for more. The druggist said, "I can get it for you, but it's nothing but Epsom salts and some other cheap things, selling at a high price. The manufacturers are no account—they sell to ministers and country doctors." The man replied, "It's the best thing I have ever taken." He came to me for more.

C. H. WALSH, M. D.

Houston, Texas.

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Verily we ought to love this kind of a retail druggist. The doctors ought to just adore him and do everything they can to build him up, while he, in season and out of season, tries to tear everybody else down. Fortunately he numbers few and the number is growing rapidly less.—Ed.

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### RIGHT HOT.

A young lady of 23, an obliging old woman had assisted from under a cloud. The girl was suffering severely and bleeding profusely, but stoutly objected to an examination. Said she had taken cold. I prescribed and left, asking to be informed if any untoward symptoms developed.

Early next morning I was summoned by 'phone to come quick. Being very busy I did not reach her until 1 p. m. I found she had lost much blood, was tossing from side to side of the bed, slightly delirious. I inserted the thermometer, and it promptly registered 112.

The prompt use of silver nitrate gr. 5 to the ounce, stops the spread of diphtheria through the nasal cavities.

Tried again, with the same result. The axillary heat was 101.1.

I found a mass of fetid flesh protruding, a fetus, which I removed, and irrigated the uterus with permanganate solution, the only antiseptic at hand. Gave a thorough bath and waited results. After an hour I flushed the rectum thoroughly and gave phenacetin in heroic doses every twenty minutes. In an hour the temperature was 107.5. Next morning the lady was quite comfortable at 102. She recovered, and promised to do so no more.

W. W. EVANS, M. D.

Chillicothe, Ohio.

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That is an extraordinary temperature even for sapremia. The brain of the young appears to withstand hyperpyrexia better than that of age.—Ed.

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#### DIFFICULTIES.

The July CLINIC is all right and the alkaloids are all right, except that the cost is more than that of specific medicines. My competitor is a regular, and uses large doses of calomel and of medicines in general. I need not tell you that his patients often get pretty sick, and if they do recover his friends say he is a skilled physician. I use small doses, and when a patient is quickly relieved it is often said that that man was not very sick; he got up too soon for that. Now, Doctor, why should I use any medication that will do better than my present supply is doing?

W. H. DICE, M. D.

Coloma, Mo.

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You have got to manfully stand up for your own side in this matter and never

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Scillitin represents the virtues of squill, *Scilla maritima*; a stimulant expectorant similar to sanguinarine.

lose a chance of clinching the fact that under ordinary treatment your cases would have been as severe as the other fellow's.

Your specific medicine is all right, but it isn't as good as the alkaloids. If you are sick yourself, or your wife or child is sick, you want the best, so why not give it to your patients, also?—Ed.

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#### EXPERIENTIA DOCET.

Everything that emanates from Drs. Abbott and Waugh is so refreshing and rejuvenating that I cannot forego the pleasure of even taking the crumbs from those master's tables.

I have been young, but now I am old, 90 years, but never have I seen the proper theory of the cause of fever, or its proper mode of treatment, until it dawned in THE ALKALOIDAL CLINIC, which has downed the humoralists who relied on a few bold detergents; the disciples of Cullen and of Rush upon the lancet and other debilitants; the Sympathetists on mercury almost entirely; the Broussais on the lancet and demulcents; the followers of Cooke upon calomel; and the present dominant practice, embracing opium, quinine, turpentine, hydropathy and veratrum viride, with strychnine always on hand to revive the heart when the veratrum weakens it too much.

J. C. CAMPBELL, M. D.

Denmark, N. C.

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But we do not want to down anyone or anything except Ignorance, against which we wage unceasing warfare; Doubt, to which we oppose Certainty; Pessimism, against which we present a

In large doses scillitin is an emeto-cathartic, hence the beginning of nausea is the signal for its suspension.

already attained, that we who battle for the lives of others may always know where to find a drug that will work just as well in the bad cases as in the good cases.

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## F. E. BURGEVIN, M. D.

Spiro, I. T.

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We doff our chapeaux in acknowledgment.—Ed.

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And calcium sulphide—the Abbott calcium sulphide—is a truly great remedy. Wherever indicated, I tell you it does the work. But as for other makes of the sulphide, they are a delusion and a snare; and I have used brands from the best manufacturers. I have tried it—given P. D. & Co.'s, for example, for day after day—no results; then substituted the A. A. Co.'s, and my patient and I are both happy. I could write a volume on the excellent work I have done with your calcium sulphide.

I am in my 71st year, in fine health and vigorous. I still use tobacco and coffee. My object in withholding from publication the secret of the remedy that has cured my bladder trouble and restored me to sound health is that I want those who use it to pay me something for it.

I have been in regular practice since the civil war, nearly forty years, in the country, mostly among the negroes, and they are improvident and extravagant; and consequently I am poor, in debt, and will soon pass the line of work. And if this remedy is thought by those who use it to be worth anything, I will gladly receive it.

W. E. LINK, M. D.

Wellington, S. C.

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Also eucorol, the intestinal antiseptics, calcium iodized, strychnine arsenate, and nuclein, are beyond praise. Every one of these preparations that I have as yet tried is simply marvelous in its action. None others are even nearly as good. No doctor who uses these goods regularly (and understands his business) could say honestly that medicine is a failure. *He* might be a failure; the fault would not be with the medicines.

Dr. Link has written to us telling of the great benefit he has derived from a combination of his own devising, that has relieved him from the vesical troubles incident to his age, and restored him to the enjoyment and usefulness of life. He did not send the formula, and we refused to print unless he did; whereupon he at once forwarded it. But since we have heard his story we are not prepared to

Gentlemen, you are doing a great and noble work. You deserve to be immortalized, and you will be. I hope the Abbott Co. will keep its preparations up to the high standard which they have

Scillitin raises the arterial tension and slows the pulse, hence acts as a diuretic in cardiac dropsies especially.

Dropsy with dry harsh skin, parched tongue, fevered lips and contracted features, are given as indications for scillitin.

make it public. Read the above statement and tell us frankly whether you think this old man can afford to give away to the profession this sole thing of value he possesses, the one thing that might make his old age easy. Would any of those who clamor most loudly against secrecy contribute a cent towards the support of the old man whose brain product they are ready to claim as their own? We are open to conviction, and will hold the matter for majority decision.—ED.

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### THE TWIN JOURNALS.

I think the twins the finest medical and surgical literature in the United States, or in any other state or continent.

Alkalometry brings to my mind the remark of a young fellow upon whom my highly honored, respected and greatly admired Prof. Paul F. Eve had just operated for congenital cataract. After the operation he was allowed to behold the beauties of this world, when he remarked: "It is so strange, so unexpected, so different from what I expected; while everything is so beautiful, I almost wish I had not had the operation done, it has changed me so much. I will have to learn everything again."

While I am not sorry I have beheld the light, I will have a great deal more study and work; but thanks to the promoters and their feelings for humanity, it is an advance that has been needed long since. It is so plain, scientific, with good horse sense.

Calcium sulphide I believe to be one of the most reliable therapeutic agents in all infectious diseases, also in croupous and suppurative conditions, which melt

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Do not mix stimulant expectorants like sanguinarine and scillitin, with sedatives like emetin and codeine, and expect benefit.

away as a winter's frost before a glowing sun.

P. B. GREEN, M. D.

Fort Payne, Ala.

—:o:—

Would alkalometry be really worth anything if it did not require some effort to recast the thought in new lines? But it is well worth it.—ED.

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### LEMONS.

I became acquainted with the great value of the lemon in California, where it is used for nearly everything, and as I am never averse to picking up good ideas, I have adopted some of the "old-woman's remedies." Sucking a lemon will very often settle a sour stomach or one that refuses all food. I was poisoned by eating chile-con-carne containing tainted meat, and for days could retain nothing on my stomach until I took lemon juice. This will in some cases stop the vomiting of pregnancy.

A lemon applied to a felon will often abort it. Cut off one end of the lemon and stick in the finger, leaving it twelve hours. Lemon juice is an excellent application for sunburn. I have applied lemon juice with excellent results in follicular tonsillitis. With lemon juice I cured rhus poison that had resisted treatment. It is an excellent remedy for eczema of the legs in fleshy cases with bad circulation. Apply the juice twice a day. In fevers, weak lemonade is often better than water as a drink.

C. E. HENRY, M. D.

Minneapolis, Minn.

—:o:—

I am willing to believe anything good you say of the lemon—never had enough

What but confusion can result when the stimulant expectorant 'squill is given with the sedatives in paregoric?

in my life, although I have tried hard. By the way, can you tell me what is the bitter principle in the grape-fruit? That is another thing which my system greedily absorbs all my purse will permit, and clamors for more.—ED.

\*\*\*

NOTES.

Dosimetric or alkaloidal medication is not new to me. I have practised this system for the past fourteen years, during which time I have followed after strange gods a few times, but have returned to alkaloidal medication, knowing no other that could take its place.

I received my first lessons from the *Dosimetric Medical Review*, New York, and bought my remedies for years from E. Fougere & Co. I buy Chanteaud's Seidlitz by the dozen bottles. I shall give the Abbott Saline Laxative just as fair trial.

Tobacco habit can be cured with strychnine and atropine; whisky habit with strychnine and daturine, and gold and sodium chloride tablets.

I have treated ten cases of pneumonia in the last six weeks, without a death—alkaloidal treatment. Wish you strength to make and write good things.

D. ANDERSON, M. D.

Ashton, S. D.

—:o:—

Please tell us in detail of your treatment of these habits.—ED.

\*\*\*

THIALION.

A great deal has been said at times in the CLINIC about the formula of Thialion. If you publish the following for—

You cannot increase cough and allay it at the same time. There is a good deal of idioecy in expectorant mixtures.

mula you will no doubt give the above preparation a close call:

Sodium citrate ..... 67.00  
Sodium sulphate ..... 17.00  
Lithium citrate ..... 1.50

This formula was first used in Germany with good success, and it was possibly from there that the proprietor of the above preparation obtained it.

Uricol, made in this city, is similar, only much cheaper.

Sodium citro-phos..... 72.00  
Sodium sulphate exsic.... 12.00  
Lithium citrate ..... 1.50

C. H. Robbins, M. D.

New Haven, Conn.

—:o:—

Formulas asked and given would add to the usefulness of the journal, would they not? And we want to be useful above all else.—ED.

\*\*\*

IMPETIGO CONTAGIOSA.

We are having an epidemic of this disease this winter and last in this community, and I have had a number of cases under my care. I have been able to entirely abort the disease in from forty-eight hours to five days by the use of calcium sulphide, 1-2 grain every hour until saturation of the system, taken until they have the rotten-egg taste in their throat and smell in the nose, using locally carbolic acid 1 dram to an ordinary bottle of vaselin, heated and shaken until well mixed. By keeping well anointed, the rash will be entirely checked, and others kept from taking the disease. Many doctors have called it smallpox, others Manilla itch. I find the

Sanguinarine, scillitin, senegin and ammonia constitute the stimulant expectorants and go well together to arouse coughing.

red 1-2 grain tablets of calcium sulphide much better than the 1 grain ones.

H. W. SMITH, M. D.

Sisson, Cal.

—:o:—

This troublesome malady sometimes got into the vaccine when doctors used the humanized form. It is quickly cured by efficient germicides, carbolic ointment, etc. But is it really impetigo or true variola?—Ed.

\*\*\*

#### "ON THE FENCE."

I wish to say to "On the Fence," February CLINIC: Try the small case first. You will soon want more, as I did. Surely you can select nine remedies in granule which you used to carry in the old form, and you will be delighted with the new.

C. A. GORSE, M. D.

Meadowbrook, N. Y.

—:o:—

The alkaloidal side of that fence is greased, and has no nails projecting.—Ed.

\*\*\*

#### LET WELL ALONE.

Please leave the CLINIC just as it is. We country doctors read it from cover to cover, and find every page not only interesting, but practical and instructive—just what we want.

I have dropped all other medical journals save the CLINIC and *The Medical World*.

How often have I read through the *New York Medical Record*, a \$5.00 journal, without getting a solitary practical idea. Give us the CLINIC, just as it is, and more power to you; and I guess

♥ ♥ ♥ ♥ ♥ ♥ ♥

One of the stimulant expectorants is usually enough and nothing is gained by mixing several of them together.

the great majority of your subscribers will call you blessed.

JAMES O'READY, M. D.

Milbank, S. D.

—:o:—

It is rarely wise to disturb the foundations upon which success has been built.—Ed.

\*\*\*

#### SEPTICEMIA.

I always give calcium sulphide and potassium chlorate for five days after labor, to prevent septicemia. If the woman should get it, her body would be pretty well saturated with the remedies.

HERMAN SCHMIDT, M. D.

Beavercreek, Ill.

—:o:—

Certainly; but do not neglect to practise aseptic midwifery, and to clean out the uterus at the first sign of sepsis.

\*\*\*

#### DIPHTHERIA.

I wish we could have more reports on diphtheria treated by the alkaloids. Antitoxin seems part of the treatment in all cases reported. Does every one use it?

O. J. TRAVERS, M. D.

Saratoga Springs, N. Y.

—:o:—

We'll print them if our friends will send them in.—Ed.

\*\*\*

#### GASTRIC ULCER.

I sent some time ago, for my wife, who had ulcer of the stomach, for nuclain. I kept the pain and soreness in check with iodoform and hyoscyamine, but she would not and did not improve

If every doctor who orders a mixture of expectorants were compelled to say why he uses each, could he do it?



except when taking nuclein. She is now well. Thanks for advice and for nuclein.

S. F. B., M. D.

—, W. Va.

—:O:—

I am glad, indeed, to hear that your wife has recovered, no matter whether it was nuclein or anything else that benefited her.—ED.

\*\*\*

### GYNECIC MALADIES.

Most morbid phenomena are plainly the outcome of deep-seated causes, involving the whole economy through the disorganization of the fluids and tissues of the body. The knife, therefore, suppresses only the exterior and visible efflorescence of the disease, but the disease itself persists. Especially is this true of diseases of women.

HELEN SHERRY, M. D.

Chicago, Ill.

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### CONGENITAL TEETH.

I attended a lady who bore a well-developed child, with upper and lower teeth, very soft, with little enamel. One year ago another boy was born with two upper central incisors, well-developed. When five months old he shed one of them, but the other remained.

May you prosper and live long to carry on your good work.

W. J. McCrary, M. D.

Guin, Ala.

\*\*\*

### CAMPHOR MONOBROMATE.

Where I find a rapid, irregular heart, or where there is palpitation or intermittence without organic disease, espe-

\*\*\*\*\*

Scutellarin is a mild nerve tonic, for nervousness, hysteria, chorea, monomania, suited to women and children.

cially in the aged, I have then a case that camphor monobromate, given every ten or fifteen minutes, will relieve quickly. Of course, if there be acute indigestion or some other existing cause, that must be looked after. But a heart condition as described, that is, of nervous origin, will yield surely to the 1-6 gr. tablé.

A. H. BROWNELL, M. D.

Oneonta, N. Y.

—:O:—

An observation to be remembered and put to trial.—ED.

\*\*\*

### MELANCHOLY.

A woman, 32, a case of mild but obstinate melancholy, full habit, constipation of many years' standing, ran the gamut of treatment in good hands. Exclusive milk diet, anticonstipation granules without much regard for dosage, calomel followed by cascara; seven weeks' treatment and perfect result. How is that for a case of autointoxication?

JUDSON BENEDICT, M. D.

New York City.

—:O:—

Now, isn't it wonderful, Doctor, that people think a dose of calomel followed by salts is going to empty the bowels? —ED.

\*\*\*

### EXOPHTHALMIC GOITER.

I guess I'll have to come into the fold. I am too old to learn new tricks, but always liberal and progressive.

I suggest in exophthalmic goiter colinsopia canadensis. May give cactus or digitalis at first till the heart-action is

Scutellarin closely resembles eypripedin in its therapeutic applications and like it is a conservator of nerve force.

steadied and then the collinsonia alone or with nux.

I wish you great success. Our practice needs such reformation.

J. H. DYE, M. D.

North Tonawanda, N. Y.

—:O:—

Collinsonin is too popular with too many good doctors to be unworthy a trial.—Ed.

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#### LOFTY AIMS.

Gelsemium, podophyllin and cactus I consider pre-eminent in practice in the mountains of Colorado. Gelsemium above all in "mountain fever," whatever that may be. Am desirous of testing gelsemin.

FREMONT E. WOOD, M. D.

Pine, Colo.

—:O:—

Mountain fever is a form of typhoid, and if our friend will try the antiseptics in addition to his present outfit he will be pleased.—Ed.

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#### LOTS OF IDEAS.

To Query 3118 I would suggest that his daughter drink a glass of hot lemonade every morning before breakfast, practice deep breathing, lie down half an hour twice a day and thoroughly relax both mind and body; keep her encouraged by suggestion, daily hot salt bath followed by rubbing with the very best olive oil, hot; daily sun bath while naked, plenty outdoor exercise, wear very few clothes and go barefooted, massage the entire body with special attention to the spine twice a week, dilate rectum and circumcise if needed, flush

♥ ♥ ♥ ♥ ♥ ♥ ♥ ♥

Scutellarin is a useful remedy in sexual erethism, constant excitement preventing the storage of force until needed.

rectum with warm borax solution twice a week, with long colon tube, then inject warm saline solution with Bovinine to be absorbed, drink plenty of water and eat no pork, eat plenty of pecans and hickory nuts, use Lloyd's fluid hydrastis locally and echinacea internally, nuclein, red bone marrow, ovarian extract, and kali phosphoricum 6 x.

I notice a good many fail with aconitine as an antipyretic. They give it when not indicated; it never is when veratrine, digitalin or strychnine is, and it should not be combined with them. Defervescent and Trinity are worthless because part of the ingredients antidote the others. "Shotgun" prescriptions should be a thing of the past in most cases, especially of antagonistic drugs.

Prof. Heineck's article in *The Surgical Clinic* on the uses of normal saline solution is worth the year's subscription.

Would it be safe to prescribe one granule of irisin gr. 1-12 four times a day to a pregnant woman?

Is the use of flaxseed in the eye of any advantage in removing foreign bodies?

Is there any way to disguise the taste of sodium hyposulphite?

The best two journals are the two CLINICS.

J. A. BURNETT, M. D.

Belton, Ark.

—:O:—

As to the combined use of remedies like aconitine and digitalin, it was one of the discoveries of Burggraefe—and one of his greatest—that whenever vasomotor paresis exists in the body, as in the lungs in pneumonia, vasomotor spasm exists somewhere else; or, in other words, some place else in the body there is too little blood when there is too much

Senecin has been recommended for urinary calculi, as a solvent. Give gr. 1-6 four to seven times a day for a long time.

in the lungs; and that when you put into the blood two articles like aconitine and strychnine, the parietic cells will take the strychnine up and the spastic cells will take the aconitine, each taking what it needs to restore equilibrium. This seemed to me so remarkable that I did not credit it at first, until I found by actual trial that it was true. If you try it you will also find that, just as each cell in the human body selects from the blood the nutriment it needs, so also it selects the medicine it needs.

Dr. Burnett never tried the remedies he condemns, as the records of the Abbott Company's sales show. He speaks from a *a priori* conclusion, as one may infer.

Irisin would be safe for pregnant women in the doses you mention.

Oculists say the use of flaxseed is of no value. nevertheless, a foreign body might adhere to the gummy seed and be extracted in this way.

I don't know anything about disguising the taste of sodium hyposulphite, but possibly a reader may tell you.—Ed.

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#### BEAN PODS.

Referring to Dr. R. St. J. Perry's article on the treatment of cystitis, and the use of the dry bean pods, I wish to say that in Hager's *Handbuch*, last edition, under the heading "Phaseolus Vulgaris," we find that the legumen of the bean, the pods freed from seeds, dried and cut, have for several years been used among the common people as a tea, and are recommended by Dr. Rahm as a specific in bladder and kidney trouble, and lately also in gout and rheumatism. Dr. Schafer uses them with other good in-

gredients as a *blasenthee*, i. e., tea for the bladder and kidneys.

Hager's work is generally considered as an authority, more yet than the U. S. Dispensatory, where we find that Solt-sien found an alkaloid in the legumen of the bean that he called phaseoline; but his examination showed it to be of toxic nature. It would not crystallize in the free state, but as a hydrochloride. Of course he may be mistaken in its effects, as his discovery was connected with trying circumstances, and the toxic effects on his subject may have been due to other causes.

There may be some other active principle in the pods of the common bean, which so far has not been discovered. I am going to try the dry pod tea on a patient who has been suffering with cystitis for some time. I am able to control it with other remedies, but as soon as the medicine is stopped the malady returns.

C. L. KATZ, M. D.

Victoria, Kan.

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#### PARALYSIS.

Nuclein and strychnine arsenate are doing wonders for a paralytic, thought to be hopeless. He can now walk much better. I am simply carried away with alkaloidal medication.

J. L. MUSSEY, M. D.

Frankford, Ky.

—:O:—

Autotoxemia is a danger in paralysis never to be forgotten.—Ed.

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#### NOTES.

The treatment of bowel troubles of children I caught onto a long time ago.

♥ ♥ ♥ ♥ ♥ ♥ ♥ ♥

Senecin is a tonic to the reproductive organs of both sexes alike. Murrell has pronounced it an active emmenagogue.

Senecin is indicated by fullness and weight in the perineum, dragging in testicle, lagging urination, in male.

I now take those cases without fear and trembling, for I feel that I have a sure cure for the little ones. A good thing is not too often said.

I am trying to develop a case of appendicitis, and am about to visit the city to consult a surgeon.

T. H. L., M. D.

—, Ga.

—:o:—

Good luck, Doctor.—ED.

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### ETIOLOGY.

The proposition on page 275 asserts that all diseases of mankind excepting traumatisms originate in the alimentary canal. This is wrong. A goodly number originate in the female vagina. Guess again.

S. E. McCULLY, M. D.

Kansas City, Mo.

—:o:—

Most of those so originating would not have the opportunity to do so were it not for the presence of too much alcohol in the alimentary canal.—ED.

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### COMMENT ON CASE.

In the August CLINIC there is an article headed "A Case for Diagnosis," that is certainly interesting. I was puzzled all the way through as I read it, but still kept on, thinking that when I got through I would certainly get the editor's comments on the case and its treatment. But when I finished there was not a word. I have no doubt many of the readers will be as much mystified as I was. Can you not give us your view of the case?

• • • • •

Senecin is of value in strangury. Its popular name of "old man" shows the lay conception of its proper place.

I am well pleased with both journals, and await their arrival anxiously each month.

A. W. ROBERTSON, M. D.

Lathrop, Mo.

—:o:—

The simple fact is, Doctor, I was as much puzzled about that case as you were, and concluded the best thing to do was to give the boy's case just as it was presented to me and let them tackle it. Between what the doctor tells and what he does not tell, the case bewilders even a professional problem solver. Tell me exactly what you make out of the case.—ED.

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### MEMBRANOUS ENTERITIS.

I have a lady on tablets of ox-gall, pancreatin and nux vomica, whom I have cured of sloughing of the intestines. Large white pieces of thin skin passed with the actions; could not hold her urine well, and was afraid to go in company for fear her bowels would act. The stools had a fearful odor. She is well; can eat anything but syrup—that sours on her stomach, though these tablets seem to prevent this in other cases.

B. H. BRODNAX, M. D.

Brodnax, La.

—:o:—

I am very much interested in that case. Evidently there is fermentation going on in her stomach, or the syrup would not disagree; and for this I know nothing quite equal to nascent chlorine made with potassium chlorate and hydrochloric acid. Is this a case of membranous enteritis? If so, your treatment is a discovery, as I have known no cures excepting from silver.—ED.

Senecin should be given in amenorrhea in doses of gr. 1-6 every four hours, increased to every hour until effect.

# AMONG The BOOKS

*Irregularities of the Teeth and Their Treatment*, by Eugene S. Talbot, M. D., D. D. S., etc. Fourth edition, with 580 illustrations. Philadelphia: F. A. Davis Co., publishers.

This is in many respects a remarkable book. As a rule, with few, very few, exceptions, the works of surgical specialists present us a picture of a man who has concentrated his gaze upon his one pet object until all other topics have been reduced to nothingness in his mental ken. These represent the first steps in the building of a science, the observation and recording of facts; and here the restriction of the field of vision has its advantages. The narrowness of the average dentist's sphere was aptly illustrated by the late Prof. Garretson, who defined him as a man whose life was spent in poking little bits of gold into hollow teeth.

Dr. Talbot's work is markedly, even remarkably, of a different character. He takes as his basis an enormous collection of clinical material, and this he seeks to arrange and illustrate from the standpoint of modern science. Profoundly versed in embryology, teratology, the modern theories of development, evolution and degeneracy, he seeks in these the causes of the anomalies he finds. For

the simple dental specialist the questions suffice of the existence of deformity and the means of remedying it. Dr. Talbot brings to each such problem the further consideration of the *Why?* There is always a why, and unless that why is appreciated the handicraft is but blindly directed.

To the elucidation of the reasons for the existence of dental abnormalities Dr. Talbot turns to degeneration as furnishing the key. In his studies of the stigmata of degeneracy he goes far ahead of the landmarks erected by earlier explorers. Necessarily so; since no one can study deeply into such a subject without finding plenty of new material to fill in and complete the sketch first drawn. In this respect the work is a mine of richness.

To one but superficially acquainted with the subject the impression may be given that the author has allowed himself to be carried away with his subject, and sees degeneracy in everything; but a little reflection will correct this error. He who has mastered the ordinary stigmata of degeneracy will soon learn to recognize as occurring with them certain other peculiarities, and if fairly constant, he will regard them as also pointing to degeneracy. And these

lead to the recognition of still others, and the correction of earlier observations; so that the final picture is quite different from that with which the study began.

To the charge that the author sees degeneracy everywhere, if it be brought, the reply may be aptly made, *is* there not degeneracy everywhere? Does the perfect man exist? Is there man or woman living, in whose composite of the inheritances of the generations, there is not a solitary downward tendency, a single step backwards in the road of development?

While Lankester long ago directed attention to the existence of devolution, we as yet have scarcely begun to appreciate its importance, and the inevitableness of its manifestations in every individual, mixed with the evidences of evolution. In each person we are compelled to strike a balance—the best of men must be judged as well as the worst.

In the practical application of these principles to the work of practice, Dr. Talbot has also departed widely from precedent, and most wisely. Most writers on the practice of any department of the art of curing, make of their books compilations of all that has preceded their publications. You get about the same things in all of them; and often after going painfully through a new "Practice" or "Therapeutics," we wonder where the author has come in. This senseless repetition makes books unwieldy and unnecessarily expensive. Dr. Talbot has limited his practical suggestions to his own methods, leaving to the student the task of searching through the text-books for the ideas of others.

Nevertheless, it would be a very wide experience that would not find in this

work adequate instruction for the treatment of every case that applied.

We have not had access to the current literature of the dental branch of the profession, but we would expect that Dr. Talbot's work has aroused considerable opposition: From the dentist "limited," who demands simply and solely a handbook of practice, and does not care to have the instructions obscured by any theoretic matter, who cares only to know what to do and would not wish to have his cerebral capacity diverted into the domain of thought. To the dental author who feels that he has said or written matter too important to be ignored, the exclusion of all but the author's personal methods would be irritating.

But to the physician the book should be most welcome. The stigmata of degeneracy are of vast importance to us; far more than to the dentist. Many a perplexing problem in physical or moral matters that comes before us would be explicable after an attentive study of this volume. Indeed, we would feel, when we saw this book on a doctor's table, that that man was on a distinctly higher plane than the ordinary practitioner.

■

*Electro-Therapeutic Practice.* A Ready Reference Guide for Physicians in the Use of Electricity. By Chas. S. Neiswanger, Ph. G., M. D. Seventh Edition, revised, rewritten and greatly enlarged. Published by E. H. Colegrove & Co., Chicago, 1902.

Many times we are asked what work the doctor should get to render his entrance into the practical uses of electrotherapeutics easy. This is the book he wants. The work of revision has been largely necessitated by the advance in

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Senecin should be given for sexual torpor in either sex, gr. 1-6 four times a day for several months, rising doses.

Adjuvants to senecin in sexual torpor are sanguinarine and cornin, to increase secretion and erections; and iron arsenate.



x-ray work. The chapters treat successively of Electricity; Volts, Amperes and Ohms; Galvanism and Battery Formation; Electrical Measurements; Polarity and Polar Effects; Electrolysis and Cathaphoresis; Metallic Electrolysis; Faradism and Magnetism; Franklinic Electricity; Static Charge; Roentgen X-Rays; The Crookes Tube; X-Ray Equipment; X-Rays in the Treatment of the Prostatic Urethra; Treatment of Varicocele; Electricity in Otology; and an alphabetic *precis* of electro-therapeutic practice from "Abortion" to "Wounds." There are 124 illustrations of apparatus, of the best make—of course we mean McIntosh. The volume is also interleaved for notes, a fashion that is commending itself to publishers, since we introduced it.

❖

*Typhoid Fever.* By J. T. Moore, M. D., M. C. P. S., Professor Hamline University, Minneapolis, Minn. Pages, 159. Price \$1.00 net. G. P. Engelhard & Co., Chicago, 1902.

A small book, but of great value, in excellently summing up a vast amount of reliable material scattered through volumes of books and piles of journals. The author did a work for the busy and progressive country physician for which he deserves eternal thanks.

❖

*Nutrition as Now Understood.* By E. M. Epstein, M. D., A. M., Ravenswood, Chicago, Ill. 1902.

This pamphlet is a reprint of two articles which appeared in *The Medical Standard* for June and July, 1902. Those who care to know the latest, almost literally up-to-date, that is scientifically entertained about nutrition, will find it in

❖ ❖ ❖ ❖ ❖ ❖ ❖

Rhus or cantharidin very carefully used might prove a valuable adjuvant to senegin in sexual frigidity from any cause.

this pamphlet of 41 pages. Modesty forbids the writer to say more, except that 10 cents in stamps will procure it from the author by mail. [This little booklet is a labor of love, the product of many toilsome hours spent in investigating a subject deemed too abstruse for the pages of the CLINIC. The most recent theories on nutrition are therein explained, and the labors of the most profound thinkers of modern Europe elucidated. It is a work well worthy the thoughtful study of him who is not content to feel that other men have studied such topics more thoroughly than he himself has done.—W. F. W.]

❖

*The Practical Medicine Series of Year Books.* Vol IX. Physiology, Pathology, Bacteriology and Anatomy, by various authors. General editor, Dr. G. P. Head. This volume is for August, 1902. \$1.25.

❖

*Photographic Atlas of the Diseases of the Skin.* By George Henry Fox, A. M., M. D. Part XV. Publishers: J. P. Lippincott Co., Philadelphia and London. 1902. Price \$1.50.

The treatise part treats of Sycosis, Syphiloderma and Trichophytosis, and the photographs are of Epithelioma Rodens, Eczema Manus (four varieties), Syphiloderma (four varieties), Papilloma Liniare (two varieties), and Rosacea Hypertrophica. In this last but one number of this magnificent and accurate work, we do not notice any exhaustion in the work of either the author or publishers; both are as fresh and admirable as with the first number, which we reviewed just a year ago to-day. We reserve what we have to say for our review of the next number, which we re-

Senegin is a stimulant expectorant, diuretic and diaphoretic; useful in bronchorrhea with deficient sensibility.

gret to expect will be the last. We only wish to be disappointed in our expectation, and that a second series of similar instructions and photographs will be entered upon by the author and publishers.

❖

*The Pocket Gray or Anatomists' Vade-Mecum.* Twentieth thousand. Publishers, Wm. Wood & Co., New York, 1901. We regret not to have been informed of the price, but we think it will always be worth more than what little you will give for it. We cannot always have the big Gray in our heads, and sometimes not even conveniently in our hand, but we can easily have this little Pocket Gray to go with us.

❖

*A System of Physiologic Therapeutics.* By Solomon Solis Cohen, A. M., M. D. Vol. IX. Hydrotherapy and Phototherapy, by Dr. Winternitz, of the Vienna University; and Crouno (Spring) Therapy, by Prof. Kisch, of the University of Prague. The translation is by Prof. Eshner; Notes on American Springs, by Dr. Guy Hinsdale; Classification and Distribution of the Mineral Waters of the United States, by Dr. A. C. Peale, of the National Museum at Washington, D. C.; Photo and Thermotherapy, by Dr. Kellogg, of Battle Creek, Mich., and on Saline Irrigation, by Dr. H. Cushing, of Johns Hopkins' University. An appendix by the editor refers to the therapeutic uses of water, heat, cold, light and mineral baths. The book contains 538 pages, with illustrations wherever needed, and a very full index of 30 pages.

The profession in all civilized countries insists at the present day on other than drug medicine in the treatment of

diseases. What these "others" are, the reader will find fully in this system of books by the reliable authorities of Germany, France, England and America. We regret to say that the volumes are not sold separately, and the entire set of eleven volumes costs \$22.00, if not a little over. The present volume is encyclopedically full and every way most useful.

❖

*The Diseases of Nose, Throat and Ear.* By Charles P. Grayson, A. M., M. D. Illustrated with 129 engravings, 8 plates in colors and monochrome. Publishers, Lea Bros. & Co. 1902. \$3.50.

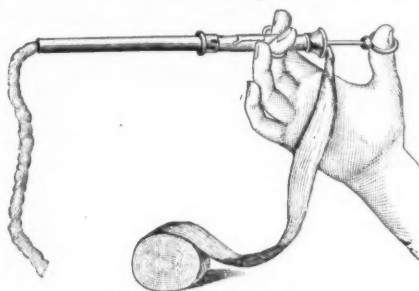
The dependence of the ear for its healthful condition on the healthful condition of the throat, and of this upon that of the nose, has long since been recognized, and works have been written and published with this dependence in view. Nasal catarrh is indigenous in this, our country of dyspeptics and constipants, and hence autointoxicants. Nasal catarrh is the despair of the self-made doctor, who is often very badly made, and the very congenial pond where and whence the quack quacks out his paludic discoveries to the public geese, ganders, ducks and drakes. Yet nasal affections are accessible and amenable to treatment, if the anatomy and physiology of the organ is familiar, as it ought to and can be to every educated physician. The last decade of the last century has added new instruments of nasal investigation and improved the older ones. So, too, has many a valuable internal and external remedy been added to this line of our resources, so that there is no excuse why every general practitioner should not be able to treat efficiently the initial affections of the nose, and thus prophylactic-

❖ ❖ ❖ ❖ ❖ ❖ ❖

The remedial applications of senegin are so far as known identical with those of sanguinarine just enumerated.

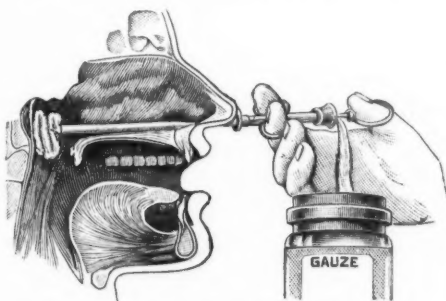
Senegin has been recommended to hasten the resolution of sluggish pneumonias, by stimulating the vitality.

ally those of the throat and ear. We have spoken as we did in order to introduce the reader to the excellent book in the title of this review. The book is the latest, so far as known in this office, on the subject, and as the author of it



Darmack's Surgical Packer.

impresses us as being a wide investigator, we have a right to expect that he tells us the latest and best what there is to do in the diseases he brought to our view. In treatment the reader will find the book very reliable as well as varied.



Method of Tamponing the Nasopharynx and Nose.

We would call special attention to the "Darmack Surgical Dressing Packer," on page 169, which we here reproduce by the courtesy of the publishers, as apparently the best in cases of epistaxis especially, and in any cavity where packing is needed.

Senegin is of value in subacute or chronic bronchitis, when the tissues need stimulation to set up reparative action.

It is not our custom to review periodical literature. Our time is too limited and too costly to give it even to books as we would desire, and so we do less for them than we could if publishers would do what they could. But we make an exception just here in the case of *The Alienist and Neurologist*, for the August 1902, quarter. It is replete with most valuable articles about things with which no physician can afford to be unacquainted, though he be no alienist. We specify no article, but take our word for it, that there is not one which you will not find interesting and instructive, barring the exception, "*De gustibus non est disputandum.*"

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*Practical Diagnosis, the Use of Symptoms and Physical Signs in the Diagnosis of Disease.* By Hobart Amory Hare, M. D., B. Sc. Fifth edition, revised and enlarged. Illustrated with 236 engravings and 25 plates. Publishers, Lea Bros. & Co. 1902. \$5.00.

This admirable treatise appeared for the first time in 1896. Its simple but very practically useful arrangement was appreciated by the profession, and it has, therefore, reached this year to its fifth edition. During these six years much research was had by the profession in this and in the older lands of culture, and valuable results were obtained in the diagnosis of diseases. The author evidently kept himself in close touch with the advances as they were made, and he presents them in the body of this goodly volume of 637 pages, and an index of not less than 60 pages. The original endeavor of the author in the first edition to make this book on diagnosis to serve as an aid to his Text-book of Practical Therapeutics is continued in this last edi-

In renal dropsy the effect of senegin, in small doses carefully watched, keeps up renal elimination and lessens exudation.

tion, 1902; and both of these useful books appear this year with the latest advances obtained by the profession the world over. Of the mechanical excellency of these books the sufficient guarantee is that they come from Lea Bros. & Co.



George M. Gould's *Illustrated Dictionary of Medicine*. Fifth Edition. Published by P. Blakiston's Son & Co. \$10.00.

This dictionary has made an epoch in the making of medical dictionaries, in striking the happy mean between a *multum in parvo* and a *multa in magno* reference book, the first of which is always unsatisfactory, and the second too cumbersome for speedy use. Then, too, it includes to a far greater extent than other medical dictionaries the terms and their short explanations of sciences allied to medicine, which sciences, except chemistry, have no special dictionaries of their own. The many tables, too, of this dictionary is a most valuable feature of convenience for reference, giving, as they do, the facility of finding the special relations of an object to other objects or states. The plan of these tables is admirable. The wood-cut illustrations are of the best to be met with, and the entire mechanical qualities, binding included, are excellent.

Having done justice to the merits of this useful and well-nigh indispensable book for the physicians' or students' study table, in the few lines permitted us, we cannot help chiding friendly Dr. Gould for some omissions and commissions.

1. Why does he not give the word "Alkalometry"? Dorland, in his *Amer-*

*ican Illustrated Medical Dictionary*, second edition, 1901, gives it very correctly defined: "The Dosimetric administration of alkaloids"; and an up-to-date dictionary like the one before us ought not to fall behind, whether the author of it approves or disapproves of the method which Alkalometry inculcates, and which thousands of American physicians follow.

2. We think Dr. Gould decidedly wrong in following the spelling of terminal "in" equally in the names of true alkaloids, i. e., those that make a salt with an acid, and glucosides and resins, which differ from the alkaloids in this special point. We verily think the "Reference Handbook of the Medical Sciences" of as good authority as any in the world, and it has adopted the spelling "ine" terminal for alkaloids, and that of "in" for all other active principles of plants. The importance of proper spelling of the names of medicaments is too great to allow anything to stand in the way of universal uniformity; moreover, since there is a need of counteracting the misleading use of terminal "in," adopted by nostrum dealers for mere commercial clamor.

3. Why does Dr. Gould omit, in this fifth edition, "Osteopathy," as a medical sect? He has "Eclectic" as a school, and "Physio-medicalist" nearly so. Why make a discrimination against a more modern sect? He says: "Osteopathy," disease of bone; and that is all, which is not all.

A typographical error is on page 1193, in the article "Proteids," Metal-albumin for Met-albumin.

Apart from those omissions, we can recommend this dictionary as the finest and most useful of the kind.



Senegin has been recommended as especially suitable for aortic valvular disease with palpitation of the heart.

U. S. Death-rate: Northeast states, 20; southeast, 13.20; gulf, 13.17; southwest, 12.70; n. central, 12.58; n. west, 8.26 per 1000.

*The Diseases of Infancy and Childhood.* By Henry Koplik, M. D. Illustrated with 169 engravings and 30 plates. Publishers, Lea Bros. & Co. 1902. \$5.00.

The merits of this book are many. It is decidedly up-to-date in every branch of pediatry, and its author has gathered his information at first hand from all lands and tongues of culture, to which literature he gives references. But he sifted well his gathered information through the test of his own experience, and such personal testimony is of great value to the reader. The author is very full in nosology, hence had to be concise in his statements, yet is he never obscure. In the item of examination, so important in infantile ailments, the author is very full, minute, and excellently directive. The book is a decidedly valuable addition to our pediatric literature.



*Physical Diagnosis in Diseases of the Thoracic and Abdominal Organs.* By Dr. E. L. LeFevre. Illustrated with 74 engravings and 12 monochrome plates. Publishers, Lea Bros. & Co. 1902. \$2.50.

An excellent monograph containing detailed minutiae, very often of great importance, but for which we may look in vain in some of our best books of general or special practice.



*Progressive Medicine.* Vol. III. September, 1902. A quarterly digest of advances, discoveries and improvements in the medical and surgical sciences. Edited by Hobart Amory Hare, M. D. Octavo, handsomely bound in cloth, 421 pages, 26 illustrations. Per volume, \$2.50, by express prepaid to address. Per annum, in four cloth-bound vol-

umes, \$10.00. Lea Bros. & Co., publishers, Philadelphia and New York.

Medical research at the present day is so extensive, so exhaustive, so expansive, so fearlessly independent of school, scheme and prestige, that a quarterly digest, like the one before us, of medical progress, is the least that a progressive, faithful physician must have to keep himself informed even a little less than "up-to-date." In the pages of this quarterly we are given the latest advances made in:

1. Diseases of the thorax and its viscera, including heart, lungs and blood-vessels.
2. In dermatology and syphilis.
3. In disease of the nervous system.
4. In obstetrics.

And a good index caps the climax of the excellency of this volume.



*Practical Midwifery.* A manual of obstetrics for students and physicians. By Edward Reynolds, M. D., and Franklin S. Newell, M. D., of Harvard University Medical School, Boston. In one octavo volume of 531 pages, with 253 engravings and 3 full-page colored plates. Cloth, \$3.75, net. Lea Bros. & Co., publishers, Philadelphia and New York. 1902.

This manual stands in volume and price midway between the larger works on obstetrics, such as Jewett's, Hirst's, or Dorland's, and the mere so-called "Essentials," which are lectures-memoranda, and not manuals to which one can refer when in practice. Its greatest merits are its comprehensiveness and up-to-dateness. In its tone it is dogmatic, but we shall have to put up with this both on account of its excellent dogmas, and knowing, as we do, the strength of the



Silver oxide is an efficient remedy for gastralgia, pain immediately after eating. Dose gr. 1-12 every five minutes.

In irritable dyspepsia, waterbrash and catarrh of the stomach, silver oxide sedates the irritation and incites curative action.

weakness of New England, from whose center the book emanates.

The make-up of the book is, of course, fine, as it comes from Lea Bros. & Co.

We must ask the author's and Dr. Schroeder's pardon for the skepticism that induced us to doubt the canonicity of Fig. 60. A cervix uteri "at onset of labor," as given there, appeared apocryphal to our Western mind.



*A Pocket Text-Book of Materia Medica, Therapeutics, Prescription Writing, Medical Latin and Medical Pharmacy.* By William Schleif, Ph. G., M. D. New (second) edition. Revised and enlarged. 12mo volume of 382 pages. \$1.75 net.

An excellent book. It is one of Lea's series of pocket text-books, but while it is too big for the pocket, it is conveniently small for the physician's desk. Its arrangement of therapeutic indications is excellent, and will be a help to any physician who is not a mere routine prescription writer, but a prescriber of remedies according to indications. We recommend this book for embodying the alkaloids and active principles, their uses and doses, as well as for its "Index of New Remedies."



*Skin, Venereal, Nervous and Mental Diseases.* Vol. X. Practical Medicine series of year books. By Drs. Baum and Patrick. September, 1902. Chicago. \$1.25.

In every department of the diseases mentioned there are new important points given in this volume, far beyond the trifling cost of it. The whole series is a very valuable one.



A treatise on the *Principles and Practice of Gynecology*. By E. C. Dudley,



In ulcer of the stomach the oxide of silver is the best of the silver salts to set up the healing process and relieve pain.

A. M., M. D. Third edition. Enlarged and thoroughly revised. In one octavo volume of 756 pages, with 474 engravings, 60 in colors and 22 colored plates. Cloth, \$5.00, net. Lea Bros. & Co., Philadelphia and New York.

This treatise is thoroughly modern in nomenclature, methods and treatment. The illustrations are abundant and guiding in the presentations of pathology and operations. The author endeavored to, and largely succeeded in, presenting the diseases of women in a rational fundamental manner, so that the same underlying principles become evident in differing but related affections. The mechanical work of the book is of the usual excellent kind of its publishers.



*Kirk's Handbook of Physiology.* Revised by Drs. Wm. H. Rockwell and C. L. Dana. Seventh American edition, with more than 500 illustrations. Published by Wm. Wood & Co., New York. 1902. \$3.00.

This long since popular text-book ought, with the revisions made in important chapters of this edition, to keep up its popularity. The price is almost lower than reasonable for such a text-book. The appendix giving classification of animals and formulæ of organic chemical substances is very useful.



*The Diseases of Infancy and Childhood.* By L. Emmett Holt, A. M., M. D. Second edition, revised and enlarged, with 225 illustrations and 9 colored plates. D. Appleton & Co., publishers. \$6.00.

Infant mortality has of late years been subjected to reëxamination as to whether we must submit to its enormity. And

Silver oxide has been recommended in hematemesis, hemoptysis and even menorrhagia; but its effects are probably only local.



in the line of scientific investigation, infant feeding was prominently and decidedly discussed. Infantile infections, diseases, too, of various organs, have received renewed investigations. Much valuable information have thus been accumulated in the science of pediatrics, which this text-book has made available for the physician in his everyday work. The book is encyclopedic and practical. A special feature of the book is its more extensive discussion of pathology than is usual in other manuals of pediatry.



Saunders Question Compends, *Essentials of Histology*, by L. Leroy, M. D., and *Essentials of Diseases of the Ear*, by E. B. Gleason, M. D. Price, \$1.00 each.

Both of these useful books are of the third revised edition, and will be found of great service, not only for the student who follows lectures, but for the practising physician, too, when he finds the need of refreshing his memory when a certain case is on hand.



*Photographic Atlas of the Diseases of the Skin*. By Geo. H. Fox, A. M., M. D. Part XVI., and last. J. B. Lippincott & Co. 1902. \$1.50.

The treatises of this last part are on Urticaria, Verruca, Xanthoma and Zoster, and photographs are of Erythema Bullosum, Scabbies, Dermatitis Venenata, Urticaria (two), Seborrhea-Steatoma, Milium (three).

On September 23, 1901, the first part of this magnificent work was reviewed by the writer of these lines. He wondered then whether the coming parts, especially the photographs, would continue in such excellency. And now it is his pleasant duty to state that to the last

every photo is excellent and every line of text reliable. We regret that the series of portraits has come to an end, and trust that another series will be undertaken by the same author and publishers. We feel called upon to congratulate both of them on the magnificent service they have rendered with this atlas to the medical profession. "*Palmarum qui meruit ferat.*"



*The International Text-Book of Surgery*. In two volumes. By American and British authors. Edited by J. Collins Warren, M. D., LL. D., F. R. C. S. (Hon.), professor of surgery, Harvard Medical School; and A. Pearce Gould, M. S., F. R. C. S., of London, England. Second edition. Thoroughly revised and enlarged. Vol. I. General and Operative Surgery. Royal octavo of 965 pages, with 461 illustrations and 9 full-page colored lithographic plates. Vol. II. Special or Regional Surgery. Royal octavo of 1,122 pages, with 499 illustrations and 8 full-page colored lithographic plates. Philadelphia and London: W. B. Saunders & Co. 1902. Cloth, \$5.00, net.

Hardly two years have passed since the first edition of this international grand work appeared, and here we have already a second one. The late Spanish-American and the South African wars have given such an amount of important surgical experiences that the scientific spirit of the authors and the enterprise of the publishers could not or would not wait to incorporate these in a second edition later than at once, adding 73 pages of new matter.

The plan of the work is extensive and thorough, so that the individual articles are only not as full of detail as



In chronic diarrhea and dysentery the oxide is the best of the older silver salts. Dose a grain each 24 hours.

Silver oxide has been used with some success as an alternative in chorea. The irritation may have been in the stomach.

monographs would be, but it is safe to say that no surgical item even of the least importance but is discussed in these two volumes.

The mechanical part is excellently well done, and the price is, a marvel of cheapness for such an amount of excellent mental and physical work.



Saunders' Medical Hand - Atlases. *Atlas and Epitome of Traumatic Fractures and Dislocations.* By Prof. Dr. H. Helferich, of the Royal University, Greifswald, Prussia. Edited, with additions, by Joseph C. Bloodgood, M. D., of Johns Hopkins University, Baltimore. From the fifth revised and enlarged German edition, with 216 colored illustrations and 64 lithographic plates, 190 text-cuts, and 353 pages of text. Philadelphia and London: W. B. Saunders & Co. 1902. Cloth, \$3.00, net.

This is the fifteenth volume of this fine series of hand-atlases which we have had the pleasure of reviewing in this office. This volume, like the rest of them, is as conscientiously and carefully executed as an epitome of so extensive subjects as fractures and dislocations could well be made. The mental and mechanical work are well done and the price is very reasonable.

It is moreover gratifying, that each volume can be purchased separately, giving thus the never too rich practitioner an opportunity to buy one as he may need.



*Treatment of Fractures.* By Chas. L. Scudder, M. D., of Harvard Medical School. Third edition, revised and enlarged. Octavo, 480 pages, with 645 original illustrations. Philadelphia and

London: W. B. Saunders & Co. 1902. Polished buckram, \$4.50, net; half morocco, \$5.50, net.

From the very first edition of this most useful monograph in 1900 it at once obtained a popularity which demanded a second edition in 1901, which was revised and 26 illustrations added; and now we have already a third edition, again thoroughly revised, and 34 more illustrations added. The recent wars in Cuba, the Philippine Islands and South Africa have added to our surgical experiences in fractures, too, and like in the case of the *International Text-Book of Surgery*, reviewed above, the same publishers were as enterprising, as Dr. Scudder was benevolently scientific enough not to withhold them from the profession any too great length of time.

As a monograph the work before us is a model of practical utility both in language and illustrations.



*A Nurse's Guide for the Operating Room.* By Dr. N. Senn. W. T. Keener & Co., Chicago. \$1.50.

This book comes from one of the highest authorities, both surgical and nursing (please accept this coinage, it is needed), in this city of much and splendid surgery. Senn, the world knows to trust, and so we may, too, the Sisters of Charity of St. Joseph's Hospital in Chicago.

The book contains only 127 pages, but the pages are extra large and the type small but clear. A nurse is of indispensable need and benefit when she is trained by a master, and when she learns willingly from approved and reliable nurses.

The directions in this book are minute and ready for being practised. Altogether an excellent manual.



Silver oxide was once used in epilepsy but the danger of argyria is greater than the chances of a real cure.

The writer knows of at least one cure of locomotor ataxia resulting mainly from the use of the oxide of silver.

# Condensed QUERIES Answered

## PLEASE NOTE.

While the editors make replies to these queries as they are able, they are very far from wishing to monopolize the stage, and would be pleased to hear from any reader who can furnish further and better information. Moreover, we would urge those seeking advice to report the results, whether good or bad. In all cases please give the number of the query when writing anything concerning it. Positively no attention paid to anonymous letters.

## ANSWER TO QUERY.

ANSWER TO QUERY 3304:—When a boy I had malaria, took quinine on a prescription, but the chills would return every third, seventh or fourteenth day. An old lady told me to buy a box of Shallenburger's pills, and if they did not cure me she would give me back my

money. I could hardly walk any then. So I bought a box, and behold—no more chills. Others tried them, but got no relief. The main ingredient was arsenic.

JULIUS WESSELOWSKI, M. D.  
Jewell City, Kansas.

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## QUERIES.

QUERY 3382:—"Vertigo." I have had light head for months, not relieved by cholagoges, soreness in rectum above reach of finger; flushing brought away long mucous strings, some white, with no relief; each colonic flushing brings much mucus; sense of uneasiness in rectum and vertigo nearly always present, no perfectly formed stool for some time. Liver sluggish, appetite good, mucous discharge so abundant as to be almost alarming.

C. H. T., Kentucky.

Rhus tox m. 1-10 three times a day, pushed up to ten times if necessary. Add silver nitrate to the water used in flushing the bowel, one grain to each eight ounces. You may need in addition to this mercury binocide and copper arsenite, with juglandin, but I would hold them in reserve until you have tried rhus for a week or two. Do you get plenty of fruit juices in your diet? They are very necessary indeed.—Ed.

QUERY 3383:—"Widow." Have a case of widow, 50, has spells of some minutes' duration, loss of memory, asks some question over and over, doesn't know where she is or her friends, frail, small eater, trouble of some months' duration, resembles atypic epilepsy.

W. T. S., Minnesota.

The attacks you describe are certainly like *petit mal*, but I guess they are hysterical and the woman is having change of life. Try her anyhow on macrotin pushed to the limit of toleration and verbenin gr. 1-3 four times a day; by no means neglecting, however, to first empty the bowel completely and keep it clear and aseptic.—Ed.

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QUERY 3384:—"Diabetic Gangrene." Male, 68, diabetic 15 years, treated by the Anti-diabetes granule and diet, alternated with Arsenaurol; at present only a trace of sugar. Feet extremely pain-

ful, not swollen but angry red spots—one small sore—no application relieves—fear gangrene.

I. M. M., New York.

Gangrene is threatened. Massage the affected part thoroughly for half an hour twice a day with hot camphor liniment. See that the excretion of solids by the kidneys is kept fully up to the standard. It may be necessary to flush the kidneys by colonic injections of hot saline solution.—Ed.

QUERY 3385:—"Acidity." We are having a number of cases just now of excessive acidity of the urine, probably due to uric acid. Some are rheumatic, some stomachal, a few due to faulty nutrition not traceable to either. If due to gastric hypochlorhydria, and I prescribe hydrochloric acid and pepsin after meals, the patient ought to be better. But suppose it is rheumatism—should I prescribe the same and also rheumatic remedies, soda salicylate, midway between meals? Or shall I leave out the digestive mixture and use a remedy to render the urine alkaline, such as lithia or soda? Will the digestion be as good by leaving out the digestants? Where the trouble is truly nutritional, what shall I prescribe? Is there ever hypochlorhydria with rheumatism or nutritional troubles?

Let me suggest a dressing and poultice as an antiphlogistic measure in all phlegmomatous inflammations, peritonitis, and conditions requiring external applications: Take equal parts of glycerin and alcohol, add the same volume of water (water varying as needed), with this saturate a thin layer of absorbent cotton (one thickness of common cotton), and over this place oiled silk or gutta-percha, then apply it over the seat of the inflammation. Keep the cotton moist with the mixture. It will need to be saturated every hour or two, depending on the severity of the inflammation. If you use this once you will never use a flaxseed poultice again. Boric acid can be added as a mild and safe antiseptic.

Of any of the salts of silver one dram may be given an adult, and then there is danger of argyria if continued.

Our late medical works have much improved since I began to practice; but let me observe how much smaller and better they would be if men wrote only what they actually knew and had verified in practice, and how large the volumes to contain what these men don't know.

Careful comparison of notes with good, conscientious physicians seems to show that the legitimate practice of medicine does not pay in this locality. What is the cure? A dentist here makes twice as much money as a physician, and works only five days of eight hours each a week, while we work, or at least live subject to call, 24 hours a day, 7 days in a week.

What would you do in a case that eats well, sleeps well, passes two quarts of acid urine, s. g. 1010, every 24 hours, for months? Never found albumin in a filtered sample, no blood nor casts; female, 45, married.

S., Wisconsin.

If your cases are due to hypochlorhydria why not give physostigmine with your pepsin and hydrochloric acid? If rheumatic try Salithia, which has been devised by Dr. Abbott to meet that condition in his own person. My conviction is that gastric antiseptics are needed in all rheumatic cases. Possibly chlorine water is the best of these, and I have found a mixture containing it with free hydrochloric acid, taken before meals, is not contra-indicated by rheumatism.

I have taken up the financial problem editorially as you will soon see in the CLINIC. I hardly see that there is much needed in the case you describe, the woman, unless it is to limit the amount of animal food taken.—Ed.

QUERY 3386:—"Adenitis." Boy, 11, strumous, glands enlarged, never ill but never strong. How about nuclein?

W. W. C., Indiana.

You will not get a very quick result from the nuclein. It should be given in such cases for a month. But what is the

If the use of colloidal silver be really free from the danger of argyria this metal's field of action will be widened.

matter with putting the boy on iodides of iron and arsenic with almuin? That would be my prescription, with nuclein to give an edge to the other medicines.—ED.

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QUERY 3387:—"Backache." Girl, 8, healthy except for paroxysms of pain from kidneys to sternum. Kidneys ache at times, urine cloudy or high colored. Ill one year; treated by several doctors. Began the day after jumping from bales of cotton, with soreness in back, avoiding motion of legs, especially when stepping down from high places.

J. F. P., Texas.

This child may have dislocated a kidney, or have bruised by concussion some of the structures of the spine, or she may have a calculus, which seems to me the most likely, although she is very young for that, unless she is living in a district where calculus is common. I would advise on the latter supposition that she take lithium benzoate gr. 1-6 and arbutin gr. 1-67, of each every hour while awake. Keep her bowels clear with saline laxative at the same time.—ED.

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QUERY 3388:—"Copper for Phthisis." A minister dropped in and very pleasantly told me that tuberculosis would soon be conquered by the copper cure. I heard his claims, accepted his literature, and now I want to be posted by his next visit. Do these people do the tenth part of what they claim? Have any cures come under your observation?

E. A. S., Massachusetts.

All that is known on the subject of copper for tuberculosis is contained in Dr. Waugh's book on Respiratory Diseases. A French physician, Luton, recommended copper phosphide, and it has been used a little, the reports being negative. Like many other remedies it has

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Crede's colloidal silver is said to be free from the danger of causing argyria. But is it as efficient as the oxide?

never been half tried. One of my former patients reported that she was recovering under this advertised copper cure. She was buried last Sunday.—ED.

✽

QUERY 3389:—"Cystic Spasm." Man, 20, gonorrhea three years ago, treated with methylene blue by mouth, discharge six months, has since had attacks of severe pain, in stomach at first, but lately in bladder; lasts some hours, no after effect, pain above pubes radiating to testicle and end of penis and perineum, penis and one testicle contracted, preceded by strangury, always some vomiting, cold sweats; dyspeptic, black around eyes, costive, left ventricle dilated, has lost weight; urine sent.

H. S. B., New Jersey.

The abundance of oxalates and uric acid shows this to be a calculous affection, for which I would advise careful diet, excluding acids and meat as much as possible, and forbidding coffee. Keep the bowels clear with a morning dose of saline laxative, and give lithium benzoate gr. 1-6 every hour while awake. Treat the paroxysms with glonoin gr. 1-250, hyoscyamine amor. same dose, and strychnine arsenate gr. 1-134, every ten minutes until effect.—ED.

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QUERY 3390:—"Cystitis." I have been under the weather for some time, and send urine for examination. I had acute cystitis last April, and am just recovering from a second attack. For two years I have had tedious urination, a flow, then a dribble, and another flow after waiting. No venereals, no stricture, some indigestion, bowels regular, life regular, no stimulants, age 50, prostate not enlarged.

W. L. W., Texas.

The urine shows the effects of indigestion in the presence of bile and oxalates,

For further suggestions on these queries see the "Ad Index" in the advertising pages following.



and of cystitis by the pus. I would advise a careful regulation of your diet and the use of dioscorein and juglandin, gr. 1-2 each, before each meal and on going to bed. For the cystitis add to the above one grain daily of arbutin in divided doses. Let these be taken for three to six months, and I think the effect will be all you could desire. As the cystitis subsides, for the paresis of the bladder add cautiously rhus tox in small doses, gradually increasing until slight irritation of the bladder is manifest.—Ed.

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QUERY 3391:—"Dentist Wanted." If you know a dentist wishing a location have him write me.

S. F. Scott, M. D.

Waukomis, Okla.

I do not know of any just now. I'll put your note in the CLINIC and you will get lots.—Ed.

☞

QUERY 3392:—"Diabetes Insipidus." I am ill four years, diagnosed as polyuria, neurasthenia, all kinds of stomach, bowel and rectal trouble; but treatment has failed. Weight 123, height 5 ft. 6½ in., stomach weak, indigestion, intestinal bloating, dull pain in left side about descending colon and in back, very constipated, rectum paretic, small hemorrhoids, frontal headaches, dull exhausting pain in nape of neck to left shoulder-blade, head dull, cloudy and heavy feeling; nutrition below normal, very weak and emaciated, sleep very good, appetite very good, nervous and exhausted, drink 8 to 32 oz. water at a time; pass large quantity of urine every few minutes, water-white, neutral, s. g. 1009, solids per liter 20.97 grams, urea 0.004 in 1 cc., uric acid none; albumin, sugar, mucus, oxalates, crystals, pus cells, blood, casts, leucocytes, epithelial cells, none; chlorides normal; sulphates, phosphates, earthy phosphates, traces; quantity from one to

three gallons from 7 a. m. to 10 p. m., s. g. in morning on rising 1020.

F. J. W., Missouri.

Diagnosis, gastro-intestinal catarrh, contracted kidney, diabetes insipidus. Treatment: Regulate bowels with anti-constipation granules and colonic flushing. Give arbutin a grain a day for the kidneys, and nuclein ten minims three times a day to restore vitality and the excretion of uric acid. This treatment is tentative and I should like a report after three weeks.—Ed.

☞

QUERY 3393:—"Diarrhea." Man, 69, has had chronic diarrhea for years, with nausea, once a week; treatment has failed; will give any price to be cured.

C. S., Texas.

These cases have responded admirably to the following treatment: First clean the bowels by the use of neutralizing cordial, the following formula: Sodium carbonate 1 dram, zinc sulphocarbonate 1 dram, wine of ipecac 2 drams, tincture of hydrastis 6 drams, tincture of castor 6 drams and aromatic syrup of rhubarb sufficient to make six ounces. Dose: A tablespoonful every four hours until the stools assume a natural appearance. It may be wise to accompany this by colonic flushing, using half to one grain of zinc sulphocarbonate to the ounce; then put your patient upon the following prescription: Juglandin, silver oxide, iodoform gr. 1-6, copper arsenite gr. 1-250, one granule each every two hours excepting when the patient is asleep. In a few weeks you would have to lay aside the silver but continue the others for several months. The diet should at first be limited strictly to the raw white of egg in water and freshly pressed juices of perfectly sound fruit, to which could be add-

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No remedy compares with silver salts locally in the treatment of mucous colitis. Use enemas gr. 1 to 8 ounces.

It is doubtful if any agent so surely sets up healthier action in a catarrhal stomach as the oxide of silver.



ed the juice of beef, for which Osborne's presses are admirably devised. After that the diet could be carefully enlarged, adding one article at a time and continue those found to agree. The one thing to be guarded against in the whole treatment is allowing toxic matter to remain in the bowel. If the malady resists, rub Unguentum Crede into the abdomen.—Ed.

QUERY 3394:—"Divining Rod." Where can I find a good mineral rod or needle that is sure to work?

A. M., Arkansas.

My conviction, Doctor, is that the mineral rod is a humbug. I am very sorry indeed we cannot put you on to something of real value.—Ed.

QUERY 3395:—"Emetic." What do you recommend as the best and surest emetic?

E. W. D., Ohio.

No ordinary emetic equals emetin for certainty and mildness of action. Give 1-6 grain in an ounce of warm water every five minutes until it acts.—Ed.

QUERIES 3396-7:—"Enteritis." Woman, 73, for many years troubled with bowels, neurotic, aortic stenosis, urine 1010, no sugar or albumin, digestion good, abdomen tympanitic, at times very tender, girdle pain, regulated with cascara, overdoses cause great aggravation, improved on tonics.

"Neurasthenia." Wife, 38, neurasthenic three years, fullness at base of brain before menstruation.

A. F. W., New York.

In your first case give the lady an intestinal antiseptic, with copper arsenite gr. 1-250 and juglandin gr. 1-6, every two hours while awake, continuing to

flush her colon and carefully regulate her diet. These old people are apt to eat too much.

In the case of Mrs. B. the fullness at the base of the brain, will I believe, disappear under the use of cypripedin gr. 1-2 and cicutine hydrobromate gr. 1-67 every two hours until relief. The bowels should be regulated with anticonstipation granules. In a case similar to your first one I found nothing did as much good as copper sulphate gr. 1-12 every two to four hours.—Ed.

QUERY 3398:—"Enuresis." Girl, 18, enuresis from infancy, otherwise perfect health, drugged for years without benefit. No trouble by day, sleeps on rubber blanket and wakes in morning soaked. No sensation with flow—sleeps like a log through it.

J. R. P., Massachusetts.

The girl's sleep is abnormally profound, affecting even the sphincter. Something to prevent such sound sleep would be in order, atropine especially. Next, to stimulate the sphincter, either cantharidin or rhus tox. Third, to lessen irritability of the urine, lithium benzoate. Perhaps the third indication would be better met by euarol applied to the urethra.—Ed.

QUERY 3399:—"Enuresis." My girl, 8, has nocturnal enuresis, an hour after retiring; nervous, gets up in sleep, hard to arouse, talks, but remembers nothing of it next morning. Well in other respects.

C. A. G., Kansas.

Give this child arbutin gr. 1-67 seven granules a day for one month, with hyoscine hydrobromate at bedtime gr. 1-1000, cautiously increasing.—Ed.

When silver solutions are applied to any diseased mucous membrane a better state of affairs is always induced.

For further suggestions on these queries see the "Ad Index" in the advertising pages following.

QUERY 3400:—"Epilepsy." A case of *petit mal*, or Jacksonian epilepsy. Lady, 35, large, strong, healthy, affected nine years; since birth of child had ovarian irritation, fits at or just before menses, lighter since on bromides, but has light seizures occasionally.

G. W. D., Michigan.

This patient would be markedly benefited by taking colchicine gr. 1-134, from three granules upwards a day.—Ed.

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QUERY 3401:—"Epilepsy." I have an epileptic on verbenin, and she has been doing well, until the last three weeks. She now claims that the verbenin moves her bowels too often. Does it act that way when giving two granules three times a day? If so, what should be given with it?

J. R. W., Indiana.

Verbenin seems to act on the bowels sometimes. When that is the case lessen the dose somewhat, if it is too much. Generally, some action of that kind is a mighty good thing. Or you might add a little resorcin to each dose.—Ed.

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QUERY 3402:—"Epilepsy." Woman, 35, epileptic since 16, improved with bromides and chloral, but has an occasional fit.

L. P. A., Texas.

The occurrence of epilepsy about puberty would indicate the wisdom of a thorough examination of the sexual apparatus, and the correction of any abnormality found there, no matter how trifling. Treatment: Exclude salt from the food rigidly and give verbenin gr. 1-3 four times a day, increased if necessary.—Ed.

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QUERY 3403:—"Exophthalmic Goiter." Since I began the practice of medicine I have used active principles, and have

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Never forget the danger of argyria when administering silver, but don't forego this valuable remedy for fear of it.

had no cause to complain. I have tried other makes of granules than the Abbott, but have come back to stay. Usually, with these at my command, I can find the correct remedy and apply it successfully; but now I am up a stump.

Girl, 3, small, thin, skin yellow and unhealthy, eyes prominent, quite nervous and restless, bowels regular, no appetite, irregular fever (malaria excluded), slight cough, no sputa. Diagnosis, exophthalmic goiter.

S. M. H., Ohio.

I think your diagnosis is correct, and this would be my treatment for the case: Juglandin and lycopin gr. 1-6 each before each meal. Add to this cicutine hydrobromate, gr. 1-67 a day, cautiously increased to full effect. I would be most pleased to hear of the results in this case and to give you any further suggestions in my power.—Ed.

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QUERY 3404:—"Gastroenteric Mycosis." Woman, 40, indigestion a year ago; gave Seng, mouth got sore, white spots on tongue, diffuse inflammation; in a month got nearly well on soda sulphite; then diarrhea, everything eaten running off, or on standing; improved on zinc oxide, but emaciated, for which took saw palmetto and the bowels got bad; on zinc strychnine, atropine and Pancrobilin, mouth as bad as ever; now extremely emaciated, mouth sore, bowels bad, on zinc, strychnine, atropine and soda sulphite.

J. L., South Carolina.

Give this woman a moderate dose of saline laxative in a glass of cold water every morning on rising, and intestinal antiseptics every two hours excepting when asleep, five drops of nuclein on her tongue three times a day to restore vitality, feeding her carefully. You have to do with a case of gastro-intestinal mycosis. Flushing the colon with warm

Give copper arsenite and W-A Antiseptic in cholera infantum and bowel troubles among children in summer.—W. G. King, M. D.

water containing zinc sulphocarbonate, 1-2 grain to the ounce, will undoubtedly be of benefit.—Ed.

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QUERY 3405:—"Gastro-enteritis." What do you recommend for chronic gastro-intestinal catarrh? Saline laxative and anticonstipation granules keep the bowels moving. Any food causes bloating, always excessive, not aided by intestinal antiseptics. Hot enemas do little good. Renal secretion scanty, no albumin. Case of four years' standing, following dysentery.

C. V. W., Oklahoma.

Add to the salines antiseptics and juglandin gr. 1-6, every two hours while awake; and a few granules daily of physostigmine. The secretion of the kidneys, however, must be increased; and for this boldine is the remedy, gr. 1-67 seven times a day, with a good supply of water. Regulate the diet, however, very carefully, and strictly forbid cold drinks.—Ed.

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QUERY 3406:—"Green Diarrhea." Baby, five months old, has since birth passed only green stools. Suggest treatment. I have tried alkaloidal remedies in a great many cases, and have had success right along.

W. G. A., Kentucky.

Juglandin gr. 1-67, zinc sulphocarbonate gr. 1-6 and silver oxide gr. 1-67. Give the first a granule every two hours until the stools become natural. If not sufficient add the second, a granule every two hours, and if something else is still needed, add the third, a granule every four hours. It would be wise perhaps to wash out the bowel with warm water containing one granule of zinc sulphocarbonate to each ounce.—Ed.

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QUERY 3407:—"Intestinal Menagerie." A patient has something in her bowels

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The Automatic Truss Co. has a new idea in trusses and a good one; and it only costs a dollar, or two for a double.

—one doctor says a frog, another a lizard, clairvoyant says a green snake. What will bring it out?

E. A. L., Massachusetts.

I don't know what that woman has in her bowels, but I do know this, that it can't stay there and won't, if she takes enough oil of male fern.—Ed.

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QUERY 3408:—"Locomotor Ataxia." A man, 28, ataxic a year; due to syphilis; has been to Hot Springs and treated by various physicians without benefit; gets about with a cane.

J. S., Missouri.

The causation would indicate gold as a probable remedy, if he has not already been thoroughly scraped out by the Hot Springs doctors, who, whatever else they do or neglect, are not apt to leave any possibility of syphilis in a man. Suppose you try pilocarpine, giving him a hypodermic every evening, enough to make him sweat or salivate. There is nothing to hinder your giving strychnine through the day, and also training the affected muscles by regular systematic exercise, keeping the bowels clear and aseptic.—Ed.

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QUERY 3409:—"Locomotor Ataxia." On page 871 a foot-note mentions pilocarpine in the treatment of locomotor ataxia. Kindly give particulars.

J. L. M., Indiana.

I don't know where I picked up that item on pilocarpine, but would advise its use in this way: Give a granule gr. 1-67 every five minutes until free sweating occurs, or salivation; then noting the number of granules required, these may be given in a single dose each day subsequently. The best results occur from giving one dose a day, enough to cause

For further suggestions on these queries see the "Ad Index" in the advertising pages following.

sweating at bedtime. There is nothing in this to contraindicate the use of strychnine during the day, or other procedures proved beneficial in ataxia, such as keeping the bowels clear and aseptic, and exercising the affected muscles so as to restore control.—Ed.

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QUERY 3410:—"Meningitis?" Sept. 2, child, 3, in convulsions, axillary temperature 105.5, slight diarrhea, vomited once at outset of attack, no tympanites, pulse full and bounding, over 200 per minute, pupils dilated but respondent to light, convulsions clonic with slight opisthotonos. Died 24 hours from beginning of attack. Several spots reported on skin, presumed due to pressure.

Fifteen days later, girl, 10, severe convulsions, preceded by headache, convulsions tonic, pupils dilated, head retracted, right side apparently paralyzed; counsel diagnosed malaria and gave good prognosis, with which I disagreed. Died 15 hours after first attack.

Five months later I had a typical case of cerebrospinal meningitis, malignant form, characteristic eruptions. The former cases simulated the last one in every particular except the eruptions. Refused certificate, demanding autopsy; another doctor gave one of malaria and a public funeral was held. In the last case the temperature was normal on my arrival, but 102.5 two hours later.

S. W. W., Indiana.

The first case might have been a foudroyant type of any acute infection, such as smallpox, the patient dying before the eruption came out; but under the circumstances it looks as if all were alike due to cerebro-spinal meningitis—at least that is my verdict from the evidence presented. If other acute fevers were present in the vicinity you do not say so.—Ed.

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QUERY 3411:—"Neurosis." Mother, 60, hard worker, fleshy, heart normal, urine loaded with phosphates, no albumin

or sugar, free after spells; after loss of children began to have attacks in which red patches appeared under left breast, size of hand, intense burning and pain not raised, merely an erythema, very offensive odor like old ulcer, then nausea, in a day intense pain at base of brain; cannot lie down, only relieved by morphine; heart slow, extremities cold, face much flushed, appetite good. Bowels regulated with saline laxative, with quinine arsenate and strychnine, she went six weeks without a spell. Is it digestive, nervous or both?

F. A. M., Virginia.

This is a neurotic manifestation of autotoxemia as you correctly intimate. Regulate her bowels with anticonstipation granules, insisting on their regular use, and meet the appearance of the trouble with zinc phosphide gr. 1-6 four times a day.—Ed.

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QUERY 3412:—"Oxaluria." Physician, 50, 5 ft. 9, weight 200, never ill; a month ago began with pain in left ureter, four attacks since; urine reddish-yellow, acid, s. g. 1020, urea 2.5 per cent, chlorates 1.1 per cent, considerable deposit of oxalate lime.

H. P., Ohio.

Castro says that "the treatment of renal lithiasis should have for its first object the expulsion of calculi already formed; next, the antagonism of the causes producing them, that no more may be formed. To expel calculi from the kidneys we use diuretics as physical agents, solvents as chemical agents, and mydriatic antispasmodics as dynamic agents. Diuretics are proper in all cases, but they must be used only at proper intervals, and with moderation, so as not to fatigue or irritate the organ. The most certain, the most decidedly physiologic, and the best tolerated, is good drinking water. By its

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Eye injuries even of long standing are amenable to rhus tox. Hinson, *Med. Summary*. Give till it irritates somewhere.

The *Medical Summary* says that the headache from overwork is relieved by pulsatilla. Try anemoin, gr. 1-134, every fifteen minutes.

action we hope that the uriniferous tubes will be dilated and the calculi expelled by pressure, aided by the lubrication of the water. As chemical solvents the alkalies should be given in small and frequent doses. Alkaline waters drank at the springs almost always cause the expulsion of large or small calculi. Lithium benzoate or carbonate may be given, gr. 1-6 four times a day. Large doses are useless, for they do not find in the economy enough free carbonic acid to dissolve them. In oxaluria the suppression of the cause is absolutely indispensable, as it is the evidence of a diathesis caused by the use of certain articles of food, such as onions, and abstinence from these will cause the symptoms to subside. The object of the dynamic treatment is to dilate the canals in which the calculi are engaged, and thus facilitate their progress towards the bladder. Hyoscyamine in two-granule doses gr. 1-250 each, two or three times a day, or atropine 1 or 2 granules, gr. 1-250 each, three times a day. The arthritic diathesis predisposes to the formation of calculi. For such cases we prescribe plenty of exercise, sobriety at the table, moderation sexually, and two to three granules of colchicine gr. 1-134 each every evening. The variant conditions are so important that the patient demands relief, and regards them as the most severe, painful, intolerable and rebellious of his troubles. Colic is the most frequent and painful. It results from the sensitiveness and contractility of the ureters, and it is due to this, that small, rough calculi may cause more pain than large smooth ones. For pain we give morphine hydrobromate, three granules, gr. 1-67 each, every quarter hour, and for spasm one of hyoscyamine gr.

1-250 every half-hour. This also relieves the vomiting that always accompanies. Rarely is it necessary to use these hypodermically. The vesical and rectal tenesmus subside as the hyoscyamine acts. Lipothymia, which may become fatal syncope in intense colics, should be treated with 2 granules strychnine arsenate gr. 1-134 each every quarter-hour, and a free but judicious use of morphine. Convulsions, which may be the result of intense suffering, must be treated with anodynes to which may be added three granule doses of camphor bromide gr. 1-6 each, every ten minutes. Hematuria yields to three granule doses of ergotin gr. 1-67, every half-hour, or the same hypodermically. Inflammatory symptoms, the most common being those of pyelitis, need a granule of aconitine gr. 1-134 every two hours, oftener if required. Dysuria or anuria calls for diuretics. Water, with two granules of arbutin gr. 1-67 every two hours, facilitate the excretion of urine."—Ed.

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QUERY 3413:—"Papayotin." What is your opinion of papayotin as a digestant?  
T. H. H., Washington.

Papayotin is the best digestant in existence, digesting all kinds of food, equally well in acid or alkaline conditions. It does not create hydrochloric acid, however, and if that be deficient, it should be added.—Ed.

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QUERY 3414:—"Paralysis." What will cure infantile paralysis of the face?  
J. K., Oregon.

Massage and faradism.—Ed.

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QUERY 3415:—"Pelvic Disease." My wife, 38, married 22 years, two sons, 21

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A full bowel in hot weather is absolutely dangerous. Take Saline Laxative in order to keep cool.—Dr. J. N. Milner, Cade, Texas.

For further suggestions on these queries see the "Ad Index" in the advertising pages following.

and 18, no misses or lacerations, weighs 100 pounds; fell a few weeks before first babe was born, and has had pain in left ovary ever since. During the last ten years she has had attacks of pain in the ovary of neuralgic type; eight years ago she had peritonitis; within a year after which she began to be lame in the left hip; two years later entirely lost the use of the left leg and has used crutches ever since. She has no power over the leg and can bear no weight on it. At first the pain was confined to the hip, now mainly in knee and ankle. She is exceedingly nervous, irritative, quick to fault; the thought of sexual intercourse nearly throws her off her balance; have made no attempt for seven years. She is badly constipated, relieved only by calomel, podophyllin and soda. Seldom moves without warm enemas. The least excitement will bring on severe headache at base of brain. Lungs weak, chest pains, heart normal, left ovary prolapsed, slight endometritis, about every three or four months an accumulation in uterus, then very nervous, then it comes with a rush, a milky discharge. Very sensitive to drugs, rarely takes any more than a day. A year's osteopathic treatment helped her bowels some. Limb not wasted, but muscles flabby: Used static electricity two years. General health improved somewhat, lameness unaffected, better one day, worse the next; appetite fair, circulation poor, menses irregular and excessive when they come. I am aware this is a long letter, and will demand more of your valuable time than I can reasonably expect; but it is my wife, Doctor, and I want help.

I am using the alkaloids and the more I use them the better I like them. They not only appeal to my best judgment, but in all cases where I have tested them, experience has borne out the fact that they are all in all. Definite dose and strength, with a definite result.

N. M. A., California.

I have read your letter about your wife with profound sympathy and greatly regret that the distance is so great

In all cases of asthma the nose must be carefully examined and any pathologic conditions found corrected.—Richards.

that I cannot very well insist on what must be my first suggestion, that we have a chance to examine her. A complete physical examination is the only thing on which advice of any value whatever could be based on such a case. In the meantime all I can suggest is the use of arsenic iodide gr. 1-67 three times a day, increased until symptoms of iodism present themselves, then keeping as close to this as possible without touching it, keeping this up for at least three months; in the meantime giving strychnine valerianate and nuclein in full doses as tonics. To regulate her bowels I would advise you to make a trial of the following, which ever you can get: A cascara pill put up by Robins, of Richmond, Va.; or Carabana water, a Spanish water imported by the Rubinat people. I have found these two specially valuable in obstinate cases of constipation, and one or the other I am sure will prove effective. If I can give you any further assistance, my dear Doctor, I hope you will call upon me.—Ed.

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QUERY 3416:—"Pilocarpine." What do you know of the use of pilocarpine hypodermically for syphilis? What is the dose here, and in locomotor ataxia? Would you use potassium iodide with it?

C. K. E., Indiana.

Pilocarpine should be given in the evening at bedtime, gr. 1-67 every five minutes until sweating or salivation begins. Having thus determined the dose, which varies with the susceptibility of the individual, you can give the granules required in a single dose on subsequent evenings. Potassium iodide may be given during the day when pilocarpine is thus given at bedtime. While the latter has been recommended highly as a rem-

Elimination kept up and Scrofonol by the skin, tells pretty near the whole story in treating eczemas.



edy for syphilis, my impression is that it is best used as an adjuvant for mercury, the latter destroying the materies morbi while the pilocarpine carries it rapidly out of the system.—Ed.

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QUERY 3417:—"Progressive Muscular Atrophy." Boy, 18, affected since 10, began in arm, then in body and now in legs; can use limbs very well; is sensible, sensation unaffected, spine curved to right during last 18 months, sex organs well developed, functions of all organs normal.

W. M. L., Arkansas.

Exercise of the affected muscles, with faradization and massage, are the standard remedies; tedious, expensive, and not very satisfactory; but what else is there to offer? Keep the bowels clear and clean—how much of malady is due to autotoxemia?

Isn't this a case of pleurisy with failure of the lung to expand as the fluid is absorbed?—Ed.

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QUERY 3418:—"Pruritus." A mid-aged woman, mother of large family, healthy till recently, itches persistently and distressingly over small area over lower part of one scapula. Otherwise healthy, functions normal.

Failed with carbolic acid, Campho-Phenique, iodine, sodium hyposulphite, blisters, every imaginable plaster and household remedy. Has persisted now over a year. No visible skin lesion.

M. D. B., Ontario.

The difficulty is that you have applied your remedies at the wrong spot. You should have begun at the stomach. Regulate her diet to her needs, avoiding coffee and rich food, and give antiseptics, the sulphocarbolates or chlorine water. With this give pilocarpine at bedtime, enough to cause some sweating, and I

am quite sure you will be all right. Zinc phosphide, which you suggest, would be the best thing to follow the above.—Ed.

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QUERY 3419:—"Recurrent Eruption." A man, 52, had smallpox at 18, and ever since at intervals of three months to three years he has had attacks similar but much modified; characteristic preliminary symptoms, even to the taste and smell, then a miliary rash, not on hands or face. The symptoms ameliorate with the rash. The attack lasts a week. Nervous symptoms of oppression attend. Will some good country doctor advise a young practitioner who has only thirty-one years' experience what it is, and what to do with it?

A. L. C., Ohio.

Sometimes attacks of infectious fevers make so profound an impression upon the nervous system that for years the anniversary of the illness is characterized by a simulacrum of the attack. I have known a severe typhoid to be followed annually for seven years by an attack that presented all the symptoms of beginning typhoid. This explanation is offered to hold the ground till our readers come to the rescue with a better.—Ed.

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QUERIES 3420-1:—"Reprints." Has Dr. Aulde's article on Dyspepsia appeared in book form?

What is the best work on Catarrh of the Throat?

A. E. M., Ontario.

The article by Dr. Aulde on dyspepsia has been republished in American Alkalometry, the price of which is \$2.00, with many other articles of at least equal merit. The best thing on catarrh we know of is Dr. Bacon's series, also republished in the same volume.

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Hay-fever: Shrink with adrenaline and apply chromic acid twice a week to inferior and anterior end of middle turbinate.

For further suggestions on these queries see the "Ad Index" in the advertising pages following.

Kindly let us know if you are a physician, as our dealings are with them exclusively. You do not sign "M. D."—Ed.

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QUERY 3422:—"Rheumatism." I am a careful reader of both the CLINICS, and find many helpful things; but there is a stumbling block in my own case. I am a rheumatic, but by careful diet, saline laxative and eliminants, occasionally sulphocarbolates, I get along fairly well. But I am very much in need of blood-makers and tissue builders; and as soon as I use anything in that line to the extent that I begin to experience some benefit I get so terribly rheumatic that I cannot get along at all.

I fail to fully comprehend the true pathology of this unusual condition. All builders serve me alike. Nuclein and Manola are among the worst to bring on the rheumatic condition. I have a slight right lateral curvature of the spine. The last severe attack was in the spine at this curve, also in the entire right thorax. Last winter I had a severe attack in the left arm, shoulder and side, worst over the heart. The attacks come on a short time after commencing the use of builders.

J. G. S., Ohio.

I have read your letter with considerable interest. It seems to me the remedy lies not so much in drugs as in the regulation of your life, the selection of a proper climate, the use of exercise sufficient to insure thorough digestion of your food, careful selection of the latter, and regulation of the digestive system in this manner: Keep the bowels clear by the use of juglandin, which also stimulates a healthy secretion of the intestinal fluids; aid this by intestinal antisepsis, which in your case I would secure from the use of resorcin, taken in sufficient doses to keep things clear. You should wear wool next to the skin; and this comprises all the suggestions I

can offer at present. It may be that the hygienic condition of your house needs attention.—Ed.

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QUERY 3423:—"Rheumatism." Mine engineer, 38, had typhoid eight years ago, leaving pains in legs, extending over body till drawn double, relieved at hot springs. Two years ago began work in wet mine, after 60 days wrist swelled, then metatarso-phalangeal joints, slowly worsening ever since; went to Gila Hot Springs, boiled, baked and bathed most thoroughly, effects resembling those of arsenic; returned worse, pain developing under scapulae so severe as to interfere with breathing, could not lie over fifteen minutes without changing position, entire body painful, walked only with canes and stooped. Pulse 84, temp. 99.6, tongue whitish-yellow, bowels not very regular, urine red and scanty, 24 oz. in 24 hours, skin lacks luster and is non-resilient, appetite small and capricious, perspiration scanty; denies syphilis but shins nodular; when the vapor baths started the sweat it was fetid for 10 days. Urine, s. g. 1025-8, alkaline, no albumin, trace of sugar, white flocculent precipitate dispelled by heat and nitric acid. Heart slightly hypertrophied, rough rasping murmur not locatable, right foot somewhat deformed, sheaths thickened.

Treatment: Arsenic, iron and mercury iodides; buchu, hyoscyamus and potas. bicarb. Urine raised to three pints, pain gone from upper half body, eats and sleeps better, feet no better. Altitude here over 6,000 feet, rainy season now, showers daily, night damp and chilly. He has had salicylates till his stomach turned, tonics, colchicum, no benefit.

C. M. G., New Mexico.

The good effect is due to the iodides, and them I would continue; giving him rhus tox from three granules a day up until full effect is manifested. Keep his bowels regular by an evening dose of eclectic hepatic tablets, and regulate his diet carefully to his needs. Continue

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Hay-fever: Quinine, ammon. chlor., camphor, each gr. 1-2; opium, ext. aconite, ext. bella., each gr. 1-10, every hour or two.

Hay-fever: Of all drugs used internally for this form of coryza belladonna or its alkaloid is the most valuable.—Richards.

your iodide tablets, possibly substituting iodoform for the iron, unless he is anemic. If this does not disinfect the alimentary canal sufficiently, add the sulphocarbolates.—Ed.

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QUERY 3424:—"Seat-Worms." Man, 45, had seat worms thirty years, worst when warm in bed, eczema from scratching. Would you advise Abbott's Tape-worm Remedy here?

O. H. W., Texas.

For this case I would advise the tape worm remedy, also the application of citrine ointment around the anus, as the eggs of the worms are deposited in the folds.—Ed.

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QUERY 3425:—"Strontium Bromide." What are the therapeutic indications for strontium bromide?

H. T. C., Texas.

Strontium bromide has the same therapeutics as potassium bromide, only that it does not knock the stomach out, poison the blood, or cause acne, as the potash salt does. You can give it in the same doses for the same conditions.—Ed.

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QUERIES 3426-7-8:—"Tenia." I send a segment of the worm. Gave male fern, pomegranate, kousso, watermelon seed, no result. Discouraged. He too.

"Dilated Stomach." Abdomen large, tympanitic, no ascites.

"Cancer." Malignant disease of hand. Axillary glands involved. Pus exuding from hand and axilla. Addicted to morphine.

H. L. W., Kansas.

The specimen is a mature joint of tape-worm. The tape-worm remedy devised by Dr. Abbott succeeds in about 98 per cent of cases.

Young children stand loss of blood badly, sepsis in the old has a peculiarly bad influence.—Moore, *N. W. Lancet*.

In your case of dilated stomach, give the patient berberine gr. 1-6 every two hours, continuing it for one month; forbid all cold drinks of every description; regulate the diet carefully, compelling the patient to eat very slowly and chew thoroughly, and never allow the stomach to become distended with food. You will cure the case.

For the case of cancer in the hand, I would strongly advise the hypodermic injection of conduragin, gr. 1-67, into the substance of the mass once a day. It should also be injected into the axillary glands.—Ed.

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QUERY 3429:—"Uricemia." Fearful nasal catarrh, scabs form day and night, dandruff, head itches, ears ring, anal sphincter relaxed, gas not controllable, bowels regular, appetite good, tired feeling, sleepy, no ambition all the time.

A. H. C., Ohio.

For the catarrh send to the Bristol-Myers Co. of New York City for a Clinton Nebulizer with the foot pump. But I suppose both it and the dandruff depend on autotoxemia, and if you quit coffee and milk, and eat very little meat, keeping your bowels regular, your troubles will all respond to the treatment satisfactorily.—Ed.

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QUERY 3430:—"Uricemia." Man, 45, weight 185, height 5 ft. 8, good feeder, bowels regular, temperate as to alcohol, never ill since maturity, prostrated by heat at 21 and since led easy life, no labor; now complains of cold feet and hands, stuffiness in head, tinnitus, queer sensation at base of brain, as though it was going to sleep, occasional pain in joints and back, knees get unduly stiff from sitting or riding, dandruff, losing hair, itching body and limbs, worse after applying cold water, when the hands will

For further suggestions on these queries see the "Ad Index" in the advertising pages following.

swell as if bee-stung; body itches if exposed to cold, worse if wet, if scratched will be thickly studded with nodules, on cold mornings in particular the feet and hands while not really warm burn and itch awfully, worse as scratched; pulse and temp. normal, skin also if not irritated, scalp dry, hair lacks luster, reflexes normal, slight cedema of legs, internal organs healthy, urine normal, nasal mucosa turgescient.

E. B., Iowa.

Diagnosis, uricemia. Treatment: Diet restricted closely as to meats, forbidding altogether beans, peas, cheese, pork, veal, milk and coffee. Best drink hot water and plenty of it. Give colchicine from three to seven granules a day, enough to keep the bowels somewhat loose.—Ed.

✽

QUERY 3431:—"Vitality Drained." I am 53, never used tobacco or liquor, at times have intestinal indigestion, bowels regular, use strychnine arsenate and W-A Intestinal Antiseptics for indigestion, kidneys quite active, urine tested recently and found normal. If I try to read in the evening I get asleep, or during the day; but if I lie down I cannot sleep. In church or in company I am drowsy; when I retire I sleep well until 1 to 4 a. m., then I am unable to sleep more; have no pain but am just wakeful. This is a nightly occurrence. My mind is not active, seems to be without action, does not retain thought. If asked what I am thinking about I would have to say, nothing. My diet is very plain—breakfast a saucer of graham and cream, an egg, bread and butter, no liquid till after through eating; dinner a few vegetables, corn and beans, bread and butter, sometimes a glass of milk, very little meat; supper, a little graham bread and butter, apple-sauce, sometimes a glass of milk. I cannot sleep when I should, and am sleepy when I should be awake. I am very nervous; my thoughts dwell on unpleasant things. My mind becomes less

active and retentive. A few years ago I would be very sleepy in the evening and when I retired I would not get to sleep till two or three in the morning.

W. E. C., New Jersey.

Your liver is not acting as it should, for which I would advise boldine, gr. 1-67 before and after each meal and on going to bed; also nuclein solution, ten drops upon the tongue on going to bed. At your age I doubt whether you can sleep more than six to seven hours, and this should satisfy you. I find it impossible to sleep more than eight hours. I should like much to hear from you after you have taken this treatment about ten days. Your diet is all right. After you have taken this treatment about three weeks I would advise apocynin, about gr. 1-4 four times a day. I think, Doctor, you would be better if you had a good change, and after all here is my prescription for you: Go out to Colorado, up to Idaho Springs, visit the mines there, talk to Prof. Shaller and try the effects of that radical change, which I believe would do more for you than medicine.—Ed.

✽

QUERY 3432:—"Worms." A child, three months old, cross since three weeks, stools contain hundreds of worms, about one-quarter inch long, under microscope have a well-shaped head, and are jointed, come in balls size of marble; especially after eating bananas. Santonin and calomel fail to bring them and banana will.

S. G. M., Ohio.

Are you sure the worms do not come from the bananas? Have them identified at the laboratory.—Ed.

✽

QUERIES 3433-4:—"Cussedness." A young lady has some affection like locomotor ataxia. In early childhood she lay

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There is a field in the United States for the exploitation of the grape cure, popular and useful in Germany.

Medicine says Dr. Leonard Wood is to be appointed to supervise the building of the Panama Canal, by the President.

in bed in a helpless condition for several years, and finally recovered so she could go about, and seemingly became healthy. But she has again relapsed somewhat into the old condition. It is asking almost an impossibility of a physician to prescribe without seeing the patient, but if you can suggest some treatment from this meager history of the case, I will thank you very much.

"Ulcers." What is the best treatment for chronic ulceration of the mouth? When the ulcers are on they make the breath very offensive. A young, healthy married woman has had them from girlhood. Can echinacea be given during the pregnant state?

A. S., Mississippi.

Cases like the young lady's are those especially amenable to the Weir-Mitchell rest cure, which does not by any means mean rest in such cases, but electricity, massage, regulation of all the bodily functions, and a little wholesome cruelty; with complete separation from the friends, and absolute control by the physician.

For chronic mouth ulcers regulate the bowels carefully, and let the patient use as lozenges berberine and zinc sulphocarbonate, which heal very nicely. Echinacea has also proved very effective; applied three or four times a day to the ulcers. It can be given during pregnancy with impunity.—Ed.

✽

QUERY 3435:—"Pneumonia: Chronic." You have examined sputa for me and referred me to Waugh's book on Respiratory Diseases. But in it I find practically nothing on the treatment of chronic pneumonia, non-tuberculous. I have placed the patient on hydriodic acid and hypophosphites. The decided hepatization of considerable lung tissue, with rapid respiration and no fever, suggest that she ought to be built down, instead of up, as the other doctors are trying to

do. Why wouldn't an old-fashioned fly-blister occasionally benefit?

W. M. B., Minnesota.

The treatment described for chronic phthisis on page 63 of Waugh's Book, and following, should be used for chronic pneumonia. It was for this reason the word "phthisis" was used, intentionally, instead of tuberculosis, that it might cover all the chronic wasting diseases of the lungs. I would advise in this affection especially the use of euarol with the oil atomizer, in addition to the treatment you have already instituted; with calcium sulphide whenever pus is present in the expectoration, and arsenic sulphide about seven granules a day at other times. Fly-blistering gives temporary relief, but I believe you will obtain more benefit from the local application of guaiacol in cod-liver oil, about five drops of the former well rubbed into the skin over the foci of disease. If you exceed this dose it is apt to cause profuse sweating. The euarol should be used eight or ten times a day.—Ed.

✽

QUERY 3436:—"Indigestion." I send urine for examination. The woman has all kinds of symptoms, palpitation, dizziness, distress at pit of stomach, spots before eyes, loss of memory, crying spells; not hysteric, nor helped by increase of urine; weighs 200, menses painful first 36 hours; actions and talk sometimes make me think of insanity.

J. R. T., South Dakota.

The only abnormality discoverable in the urine was the presence of oxalates, which would indicate indigestion. I would advise for this woman a few drops of nitric acid before meals, with juglandin gr. 1-6, copper arsenite gr. 1-250, and bryonin gr. 1-67, before each meal and on going to bed. Her diet should

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Amebic dysentery. in St. Louis, responded to treatment with santonin, in three-grain doses.—Myer, *St. Louis Med. Review*.

For further suggestions on these queries see the "Ad Index" in the advertising pages following.

be carefully regulated, avoiding sweets, fats, and ice-cold liquids of every description. I should be glad to hear from you further as to this interesting case.—Ed.

✱

QUERY 3437:—"Oxaluria." Patient has backache, gets up to urinate several times a night, knee lame a year, leg swollen, dizzy on stooping, constipated, poor appetite, sleeps badly, leg improving on sodium sulphocarbolate and anti-constipation granules. Father has myelitis.

H. M. M., South Dakota.

The remedy for this case is nitric acid, a moderate dose before each meal, which should promptly relieve the urinary symptoms and the backache. In addition to this, however, give him juglandin gr. 1-6, copper arsenite gr. 1-100, and silver oxide gr. 1-4, together, every two hours while awake. After one week substitute zinc oxide gr. 1-2 for the silver. Evidently the stomach and duodenum are the seat of his malady. If the juglandin does not regulate his bowels add a morning dose of saline laxative. If the other remedies are insufficient to render the alimentary canal aseptic add the sulphocarbulates. The urine contained bile, and if after one week of the above treatment this has not disappeared, I should add either two granules of dioscorein or one of boldine, to each dose of the above.—Ed.

✱

QUERY 3438:—"Mycosis." Mother of nine children, age 55, best of health until one year ago.

July 24, torpid liver, enlarged spleen, palpitation of heart (missing every seventh beat), uric poisoning, jaundice, dropsy in feet and knees and in face, one degree of fever. Patient exceeding-

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Ridings reports favorably on the treatment of smallpox by baths of mercuric chloride, 1 to 250.—*Southern Pract.*

ly restless, requiring an attendant continuously.

August 22, much improved; about house and at neighbors.

August 24, a hurry call; found relapse.

September 7, recovered sufficiently to go about house and visit neighbors.

September 14, another relapse, slept between two open doors and awakened with cold, pleurisy in left side; vigorous application of remedies brought rapid recovery, and September 26 I decided the battle was fought and the victory won. But early on the morning of September 29 another call came for another relapse. Pleurisy in right side; and at this writing another battle is to be fought.

Treatment: Anticonstipation granules in the evening and saline laxative in the morning to begin with. At one time I thought it advisable to give calomel and soda; gave 6 grains; kept bowels thoroughly flushed; gave codeine continuously for restlessness. Glonoin gr. 1-250 and caffeine produced decidedly satisfactory results upon the heart. Atropine gr. 1-500, apocynum (Lloyd's Specific), and hyoscyamine gr. 1-250 for dropsy, decidedly satisfactory for this feature. The fever has taken care of itself; the cause removed, there was no occasion for fever.

M. G., Alabama.

This case is one of microbic infection, the bacteria intrenched somewhere in the alimentary canal or its appendages, thence invading other parts of the body. Treatment: Apocynin to effect, boldine gr. 1-67 seven times a day, intestinal antiseptics to full effect, diet carefully suited to the needs. For debility, iron, quinine and strychnine arsenates, with nuclein, relying upon the apocynin to keep the kidneys and bowels flushed, and careful investigation to be given to the hygienic condition of the house and the vicinity.—Ed.

Hare reports favorably on the treatment of morphine and alcohol habits by the use of hyoscyne in toxic doses.—*Med. News.*



## News, Notes and Notions

At the Lakeside Hospital paraffin was recently used to restore the contour of a lady's nose, with brilliant success.

African explorers all testify that an attack of fever is sure to follow immersion in a river in malarial districts.

The use of boiled water and clean food will stop typhoid fever and cholera, as well as amebic dysentery, anywhere.

There are many observations anent malaria that the mosquito theory does not explain as yet; but give it time.

The restriction of drug habits is rendered difficult because patents containing morphine may be bought at any store.

Had the President been kept at rest after the accident, the abscess would probably not have formed in the leg.

A needle was removed from the abdomen of a 5-year-old girl at the Hebrew Hospital, after two years' wandering.

Circumcision is advocated by many as a useful hygienic measure, but there are grave objections to its general use.

A French doctor blames education for brain diseases. Only because "a little knowledge is a dangerous thing."

Cut and burn all weeds before they rot and poison the air, in the fall and winter.  
—G. J. Monroe, Cinn. *Lancet-Clinic*.

For sweating feet put in the stockings a mixture of acid salicylic and talc, 1 to 12. Use cold water and ventilated shoes.

Do you want your own pneumonia to be treated by pumping salt solution into your lungs? Call on Dr. Coakley then.

Alcoholic intoxication diminishes the natural resistance of doves against anthrax.—Goldberg, *Cent. f. Bakt. u. Paras.*

What effect has the enormous increase in the use of sugar had on the race—mental, moral or physical? *Quien sabe?*

Hot baths form the most effective treatment for indol intoxication, and probably for other autotoxemias.—Calve.

Lent has been observed nearly 2,000 years; at first for forty hours as a real fast, now only nominally, which is a pity.

Exophthalmic Goiter: Let patient lie on back, without pillow, and raise head until he sees his feet; the goiter subsides.

Europe shows a greater increase in insanity than America; farms contribute more than cities. Hurry is not the cause.

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The use of boiled water and similar precautions put an end to dysentery among our troops in the Philippines and elsewhere.

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For simple vulvo-vaginitis, Berry advises lotions of zinc sulphocarbolate 2 per cent; silver nitrate for gonorrheal.—*Post Grad.*

❖

Have you tried whether saturation with calcium sulphide will protect against the attacks of the bloodthirsty mosquito?

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Sciatica and Lumbago: Deep hypodermics ether m. 10—30, at point of pain, daily; colch. and lithia internally.—W. B. House.

❖

Chicago averaged six deaths daily from typhoid in August, eight daily in September. Improvement was reported early in October.

❖

Is the Presbyterian Hospital the only one in which such an accident as the late one could have happened? Don't shy stones too rashly.

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A writer in the *Westminster Gazette* says the cocaine habit is increasing, and its end is mental or actual death; cure well nigh hopeless.

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Artificial teeth and plates should be always removed from the mouth at night and kept in an antiseptic solution till morning.

Naylor and Huxtable found that fluid ext. ipecac lost nearly 6 per cent of its alkaloids on standing eight months, by precipitation.—*Ph. Rev.*

❖

The use of sugar in the United States has risen from 8 pounds a head a century ago to over 60 pounds. And yet our grandmothers were sweet girls.

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Boston is mildly pained, not indignant, but pityingly plaintive. A Western journal reported a Hub doctor as appointed professor of "criminal surgery." Too bad!

❖

In Formosa the Japanese protected a battalion from mosquitoes and not a case of malaria occurred. In another battalion at the same place, unprotected, 259 cases occurred.

❖

Location Open: There is a good opening in Farley, Iowa, twenty-three miles from Dubuque. Farley has three railroads. A good hustling fellow can made money from the start.

❖

The hell-fire and damnation theory of John Calvin, that for more than a century cursed the world and filled our insane asylums with victims, was due to a dyspeptic stomach.—*Med. Times.*

❖

Bruno sums up the action of dionin: Vasodilation and vascular injection; lymphatic extravasation and cedema; glandular excitation and lachrimation; burning sensation followed by analgesia.

Many an indigestion as well as infective buccal disease has been caused by a dirty set of false teeth, rarely removed.

In a trial in London a chemist affirmed that drug habits were on the increase, the professional man using morphine, the soldier strychnine and atropine, the actor cocaine, and women chloral and bromides.

❖

Prof. Lorenz, of Vienna, gave a lecture and clinic in the amphitheater of Mercy Hospital, Wednesday evening, October 15th. Subject, "The Principles of Bloodless Reduction of Congenital Dislocations of the Hip Joint" and "The Principles of Reduction of Deformities."

❖

*The New Idea* says: "Repeating prescriptions is such a common practice in every part of the country, and has been sanctioned for so long a time by a large portion of the medical profession, that it has come to be a part of the established order of things." Honest confession is good for the soul.

❖

Cleveland is so distressingly clean that in despair of otherwise earning his salary the health officer has begun a crusade against dirty money. Well, it is a dirty commodity at the best, and we heartily appreciate the man described by Lamb, who said money kept over three days stunk, and so he threw it away.

❖

The Illinois Medical College, of Chicago, opened its fall term October 1st, 1902. This school being the original summer school of medicine in Chicago, conducted its first fall and winter term in 1901. Its present, or second winter session, now in the new building, shows more than double the enrollment of students of the corresponding term of last year.

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Half a million Americans die yearly from maladies due to the use of the drugs commonly known as tonics.—*Med. Summary.*

Farr and Wright estimated the alkaloidal strength, etc., of tinctures of belladonna, cinchona, cinch. comp., nux, opium, and wine of ipecac, to see the results of the improved processes of the last pharmacopœia. The results showed that standardization had not yet secured the desired uniformity in strength, though an immense improvement in character and potency had been effected.—*Pharm. Review.*

❖

The Illinois Humane Society, assured of our interest in the prevention of cruelty to animals and children, submits from its records for the past year the following figures: Cases investigated, 3,195, an average of about ten per day; children involved and relief given, 1,041, an average of three per day; children surrendered upon society's petition, 53, an average of one per week; animals involved and relief given, 4,459, an average of fifteen per day; cases demanding prosecution, sustained by judgment of court, 159, an average of three per week; street fountains maintained, 53; animals removed by ambulance, 264. Send them a check.

❖

The eighth annual commencement exercises of the Illinois Medical College were held Thursday afternoon, September 25th, at Handel Hall. Rev. Frank Gunsaulus officiated, and the Doctorate address was delivered by Hon. John Barton Payne. Degrees were conferred upon the largest class in the history of the institution. The annual banquet was held in the evening at the Auditorium, where 123 plates were served. Dr. W. F. Waugh presided as toastmaster, and responses were given by Hon. John Bar-

I find nothing better for our southern stomach troubles than zinc sulphocarbolate, salol and bismuth subnit.—*Brodnax.*

ton Payne, Prof. C. W. French, Drs. S. S. Bishop, H. H. Brown, B. B. Eads, W. H. Davis, N. H. Adams, and W. J. Candlish, Esq., while Dr. Solomon Jones responded for the class. The college year just closed has been phenomenal, the number of matriculants 238, and with the new college building now fully equipped, a steady and healthy growth for the institution is the most logical conclusion.

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Dufoungere says chlorosis is an auto-toxemia of menstrual origin, curable by marriage reestablishing the internal secretion of the ovary. This is attributed to the absorption from the vagina of a certain specific principle which stimulates the ovary and dissipates its torpor.

✽

*American Medicine* says: "From Chicago comes the proposal that the suburban dweller shall breakfast upon a trolley dining car in order that he may save the half hour (or is it only ten minutes in Chicago?) lost in breakfasting at home. By this plan the coming millionaire jumps out of bed and, boarding the trolley car, finds that his previously-ordered breakfast is ready for him, and by the time he has eaten it he is landed at his office ready for business. But the physician and the ordinary human ruminant must in amazement ask, Why have any home at all? What is the use of marriage and children, all the old-fashioned ways, and all the ridiculous old things such as health, religion, ethics, poetry, love, peace, and the rest? Why not have meals served in the office, and supply one's self with a patent desk which, at the end of the business day, by the push of a button is transformed into a bed? If sleep is slow in

coming under such circumstances, 'the hypodermic man' is at the command of the telephone. When digestion fails, as it is likely to do after a few years of machine-feeding, chemistry will probably supply all foods in a predigested state, and anyway by that time the 'pile' will have been made. It is not added that perhaps by that time the great physiologist, Death, may have an important question to ask."

—:o:—

Poor Chicago! If the half attributed to it by the gullibility of the Easterner were true what a place it would be.

✽

Bleyer asserts that vaccinations take better when adrenaline solution is applied to prevent the access of the defensive proteids to the wound, which hinder the action of the vaccine virus.—*St. L. Cour. Med.*

✽

Harvey Medical College has undertaken to train the firemen of Chicago in "First Aid to the Injured" work.

✽

The regular physicians of the Toledo Hospital have resigned in a body because of undue favor shown the Homœopathic section of the staff by the board of lady managers.

✽

The Indiana Supreme Court has decided that so-called magnetic healing is illegal unless practised by an otherwise qualified physician.

✽

Heyden says the principal difference between Japanese and Europeans is that the former have no ear lobes; these be-

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Inaugurate the treatment of nervous diseases with a searching investigation of the secretions, urine and blood (*Brief*).

In congestive headaches from congestion of the brain give ergot in sufficient doses to control the cerebral circulation.—J. Q. Moxley.

ing developed by the use of earrings by many generations. Why have men ear lobes? Were our remote ancestors accustomed to wear these ornaments irrespective of sex?

❖

Bie says the results of red-light treatment of smallpox are such that the treatment should be made compulsory. None but experienced physicians should be allowed to use the method, as emergencies may arise rendering it necessary to break off the treatment immediately.

❖

Kulebko has extended to human beings the experiments previously performed on many animals, to restore rhythmic beating of the heart after apparent death. He is said to have restored the heart-beat to a child two days after death. It takes longer than with animals. The method may prove of value in suspended animation from drowning, suffocation, and anesthetics.

❖

Spite of the typhoid, Chicago in October enjoyed a low death-rate, the 403 deaths representing an annual rate of 11.53 per 1,000, on an estimated population of 1,820,000; which is, as every Chicagoan knows, too small by at least 180,000. The city authorities claim the improvement is due to the vigorous campaign of education carried out on typhoid and allied affections.

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The recent epidemic of smallpox in London has been a brilliant confirmation of the value of vaccination.

❖

Riedel advises chloroform for short operations; extracting teeth, skin inci-

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In strychnine poisoning give veratrum viride to the utmost, without fear; for you cannot cure with anything else.—J. Q. Moxley.

sion in goiter followed by local anesthesia, shoulder arthrectomy, adenoids, boils, small bone resections, and reduction of radial fractures.

❖

Sidonal gives excellent results in gout, lessening uric acid excretion, and both this and the sugar in diabetes.

❖

A number of observers, among them Nothnagel, report that cases of cancer supposed to be cured by Adamkiewicz's cancrin, and so reported by him, were not cured, or even benefited by the treatment. Evidently the autosuggestive microbe is prevalent in Germany as elsewhere.

❖

Kahn, studying the pulse and respiration at elevations over 10,000 feet, recommends such altitudes for phthisics.—*Med. Rec.*

❖

Glanders.—Strubell insists on his method of treatment by subcutaneous carbolic acid injections.—*Deutsche med. Woch.*

❖

Soldiers returning from China, where they had typhoid, showed the bacilli in the urine six months after the fever.

❖

*Trichocephalus dispar* is killed by enemas of benzine. How would this answer to destroy the troublesome seat worm?

❖

Rosenbaum attributes great diagnostic importance to splashing heard in the stomach a quarter-hour after drinking water, as indicating gastric atony; if constant, gastric dilatation.

In strychnine poisoning give veratrum in large and repeated doses until relaxation occurs.—J. Q. Moxley.

Wormser does not believe that retroflexion of the uterus gives rise to circulatory alterations, dysmenorrhea or reflex disturbances. Very good. He will know more about women when he is older. Some women will go through years of active life without inconvenience, though subject to all sorts of uterine ailments; while the slightest abnormality will set others crazy. I have cured a woman of ailments that rendered her almost bed-ridden, by sewing up a little uterine fissure that did not deserve the title of laceration; and others went through life with huge tears that everted the entire cervix. You must modify all conclusions in regard to Woman by the application of the personal equation as regards The Woman.

✽

Chaldecott condemns chloroform anesthesia in short operations upon the throat and nose, and tabulates fifty deaths resulting therefrom. For infants in the first year he advises ether on an open mask; up to four years, ether; four to twelve, nitrous oxide; the latter for all over twelve years. The best gag is Doyen's, introduced before the anesthetic is begun.—*Lancet*.

✽

Indiana is having a grave-robbing excitement. We are not far ahead of the Egyptians, who had the bodies of the dead embalmed and stoned the embalmers. The medical students must dissect, and must have material. The Pennsylvania law gave to the demonstrators' association all bodies of paupers who had no friends to bury them; and if this were enforced all over the state the supply would be ample for the colleges of that state. But at present we hear of the scarcity of subjects, compelling ten

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Menorrhagia: Arnica has often proved effective—a teaspoonful in a glass of water.—E. J. Fernandez, M. D., Mexico.

or even more students to work over a single body. Much benefit would accrue were the anatomy to be studied from the living body as far as practicable, which would be in about four-fifths of the course. The knowledge would be more directly applicable to the future work of the doctor, who deals with the quick and not the dead.

✽

The lady managers of the Toledo Hospital seem at last accounts to be ahead. The staff that resigned is out, and other doctors of the regular school have applied for the vacant places, which will be filled soon. It is said that efforts will be made to found a new hospital by the seceders. What a pity they had not a union, when those who volunteered to take the strikers' places would have been strictly "scabs," and so exposed to the derision of the entire working community.

✽

Chicago working men have organized the Workingman's Co-operative Home Association, with capital stock of \$50,000, and a membership of 1,200. They will build a sanatorium and summer cottage in the northern part of Marinette county, Wisconsin.

✽

Prof. Lorenz says that the skill and energy displayed by the Chicago doctors surprised him. Wonder what he expected.

✽

Temporary blindness affects men working in Niagara sewer tunnels; attributed to peculiar properties of the water.

Tuberculosis: In local forms Brie injects gold chloride gr. 16, dist. water 2 oz., 4 to 16 drops, twice a week into diseased tissue.